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A Wraparound Poverty Intervention Model: Leveraging Social
Capital Reduces Poverty

A Dissertation

Presented to

The Faculty at the University of Lynchburg

In partial Fulfillment

Of the Requirements for the Degree

Doctor of Education (Ed.D.)

by

R James Cook

May 2020

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University of Lynchburg
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Dissertation Title: A Wraparound Poverty Intervention Model: Leveraging Social Capital Reduces Poverty

APPROVAL OF THE DISSERTATION

This dissertation, A Wraparound Poverty Intervention Model: Leveraging Social Capital Reduces Poverty, has been approved by the Ed.D. Faculty of the University of Lynchburg in partial fulfillment of the requirements for the Ed.D. degree.

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Dedication

This study focuses on the benefits of Social Capital and the positive results it produces. It is not ironic that obtaining a terminal degree should incorporate the same models discovered in this work. It took more than a village to help me accomplish this goal. My team of family, friends, and colleagues were instrumental in allowing me to chase a passion that God placed in my heart. It is because of God's grace through them, that allowed me to finish this race. It is here that I discovered that the finish line is really a doorway into a wonderful world.

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Abstract

In 1964, the United States began to wage a war to end generational poverty using antipoverty policies and programs, with controversial results. The theory exists that wraparound (WA) poverty intervention programs are effective in helping participants develop relational assets (RA) and social capital (SC) to overcome the effects of poverty, yet few organizations are seeking solutions to chronic poverty using these methods. One such program is The Open Table (TOT). Their concept uses 6-9 mentors who meet weekly with a brother/sister for one year to help them identify and achieve their financial, educational, occupational, health and family goals. The Open Table refers to the person being helped as a brother or sister to ensure that everyone understands that this person is not a child to be parented or a client to be served as part of your job. He or she is someone with whom you are willing to be in relationship (OpenTable, 2019). The premise is that the brother/sister will learn to network and develop SC with their mentors and overcome poverty. TOT boasts a 97-98 percent graduation rate for participants to exit generational poverty (Katov, 2018).

Are wraparound poverty intervention programs effective in teaching necessary skills to equip individuals to escape poverty and stay out of poverty when a crisis occurs? To evaluate the effectiveness of a WA poverty intervention program in this context, the researcher conducted a qualitative study through interviews and surveys with individuals who graduated from a WA poverty intervention model and who later experienced a setback or crisis within two years from graduation. The goal was to understand participant experiences (capture their voice) and how the program taught them to use SC and RA to negotiate the crisis.

Keywords: Social capital, wraparound, relational assets, poverty intervention, change theory, poverty measurement, The Open Table, hope, social mobility, connections, network, bridging social capital, bonding social capital, trust, social assets.

Chapter 1 – Introduction

Purpose of the Study

The importance of understanding poverty cannot be overstated. Many governmental programs, non-profit organizations, and philanthropic organizations are interested in eradicating poverty, and therefore, establish national and local policies and procedures prioritizing dollars and efforts. Billions of dollars are spent annually through charitable organizations in their attempts to reduce the poverty rate. Poverty's impact on the economy drains resources, but more worrisome, it perpetuates generational poverty as health, literacy, and hope deteriorate (Morris, Santos, & Neumeyer, 2018). Society's response to poverty creates short-term solutions resulting in long-term dependency and a complex interplay of variables called the cycle of poverty (Morris, Santos, & Neumeyer, 2018).

In his 1988 State of the Union Address, President Ronald Reagan said, "The federal government declared war on poverty, and poverty won" (Meyer & Sullivan, 2012, p. 134). Research and poverty measures do not indicate that poverty is significantly decreasing (Tanner, 2014). Poverty intervention models have produced little or no success in eradicating poverty. There are a myriad of philosophies competing to find a solution. This study examines the impact of a new, emerging model using social capital as its foundation to address poverty and reduce its impact.

Poverty: Definition, Measurement, and Policy

What does it mean to be poor? Situational poverty is defined as when an individual became destitute due to circumstances and cannot meet their needs with their own resources (Morris, Santos, & Neumeyer, 2018). Generational poverty is defined as when an individual is part of a family experiencing ongoing poverty for two or more generations (Morris, Santos, & Neumeyer, 2018).

Local, state, and federal governments are continually assessing the poverty measurement markers as they seek better clarification and establish thresholds for identifying and helping the 'poor.' Society also lacks clarity in identifying measures of wealth standards. Being 'rich' is a subjective term without clearly defined thresholds except those used for taxation purposes. The threshold may not be clearly established, but we notice wealth when we see it. Author Mark Littleton describes John D. Rockefeller's reaction to his wealth of billions. In his book, he states that Rockefeller was asked what he wants now that he has accumulated so much wealth, and Rockefeller responded, "One more dollar" (Littleton, 1990). Someone who has been classified as poor may have a similar response.

Poverty influences communities, cultures, and governments. Charity is not absent in attempting to address the issues of poverty. Each of the mainstream religions gives believers guidelines on their treatment of the poor. In the Christian New Testament, Jesus reminds societal and ecclesiastical leaders in Matthew 26:11 that the poor will always be with us. Old Testament scriptures teach both Jewish and Christian followers to be kind and help the poor. Deuteronomy 15:7-11 states, "If among you, one of your brothers should become poor ... you shall not harden your heart or shut your hand against your poor brother, but you shall open your hand to him and lend him sufficient for his need, whatever it may be...For the poor you will always have with you in the land. Therefore, I command you, 'You shall open wide your hand to your brother, to the needy and to the poor, in your land'" (Bible, 1984). The Quran teaches Muslims in 70:24-25 the obligation to give charity or a Zakat to the needy, and to do so sincerely (Quran). Each faith displays a foundation of concern and support for those affected by different levels of deprivation within society.

Reaching out to help the poor is based upon an economic, cultural, and theological sense of concern for those affected. Outside of faith-based organizations, individuals who are not

religious are increasing their outreach to the poor in their belief that we are collectively responsible for the welfare of all community members and that we must take concerted action in favor of the poor (Blair, 1969). Corporations and government agencies are combining their philanthropic efforts to eradicate poverty.

Poverty and Hopelessness

By all accounts, the United States is a rich nation. The Absolute Poverty Measure (APM) for a family of four in 2012 was below \$23,050 a year. That equates to \$63.15 a day, or \$1,920.83 a month to clothe, feed, and shelter a family of four. Comparatively, in rural India, the APM is set at 5,352 rupees (\$118.93) per year. That equates to \$0.32 per day or \$9.91 a month to clothe, feed, and shelter a family of four (Fields, 2011). The World Bank uses Purchasing Power Parity (PPP) to assess poverty, which equates to an individual earning less than \$2.50 per day, or \$912.50 per year. Absolute or extreme poverty is an individual earning less than \$1.25 per day or \$456.25 per year (Fields, 2011); and the ultra-poor live below \$0.63 per day or \$229.95 per year (Husmann, 2016). Compare these incomes to the poverty guidelines established by the Department of Health and Human Services for an individual in the U.S. who is considered poor when earning \$34.22 per day or \$12,490 per year, and it appears that the poor in the U.S. are wealthier than those living in poverty in other nations.

Poverty is more than low income. Collectively, the social stigma, exclusion, lack of resources, lack of education, and the view of an individual's financial deficits compared to societal norms contribute more to an individual's persistent poverty than the lack of his or her income (Dalton, Ghosal, & Mani, 2014). A person's lack of productivity, low self-esteem, and lack of desire to seek job skills creates a perpetual cycle of despair and hopelessness with reduced aspirations to exit (Dalton, Ghosal, & Mani, 2014).

On a micro level, a person categorized as poor may or may not feel cursed. This researcher has had the privilege of leading teams into developing countries to help the poor improve their quality of life. Without fail on every trip, a majority of the team members remark about the happiness of the people who were classified by the United Nations and World Bank indices as extremely poor, and that they themselves received more blessings from the indigenous people than they could provide. In almost all the cases, the impoverished population they worked with did not have electricity, running water, or a steady supply of food. The biblical account of the poor widow is another good example. Jesus pointed her out at the temple to his disciples as an example because of her poverty and her hope. She gave all she had, the “widow’s mite,” yet she had no worries, as all her needs were provided for (Bible, 1984). Nevertheless, the desire to solve the poverty problem remains a worthy goal.

Current antipoverty programs may not be sufficient alone in quelling the poverty rate. Poverty intervention programs that use economic indices for a humanistic problem focus on income levels or comparison models, rather than taking a more holistic and multi-faceted approach. Many poverty programs are an acute response to a chronic problem that requires a systemic approach to end generational poverty (Anderson, 1967). What if we approached poverty intervention with a humanistic antipoverty program using social capital (SC) as a medium for change? Could a different approach use more social involvement to break the cycle of poverty?

While working on a remote island in the Philippines, this researcher provided solar lights to replace the need for oil or kerosene lamps to extend the day. Extended days allow for more productivity, additional light to mend fishing nets, an increase in reading time for children in school, and a reduction in the pregnancy rate. Because they would no longer need to purchase the oil, they could save that money; however, they had to learn the concept of “savings”. In just one

class, the residents became empowered to save money in order to purchase productive animals like goats, chickens, and pigs. By selling the milk, eggs, and piglets, the residents then could stave off starvation and become entrepreneurs. Through this short-term relationship, the residents realized their potential and had hope.

Place yourself in a scenario where you must rely on SC. If you lose your job, how would you begin the process of looking for a new job? When the financial crisis hit in 2008-9, many people with years of education were unemployed and seeking new employment. Immediately, unemployed individuals would call within their social network seeking advice and leads to new employment within their circle of friends. If an individual suffers from generational poverty, then most likely, most of their social network lives within the same circumstances or worse. An individual's SC is expanded when their social network crosses lines of inequality and makes connections that are more affluent. Lines of social exclusion collapse and marginalization is reduced (Johnson & Mason, 2012). SC strengthens interracial social bridges because community and equality reinforce each other by reaching beyond their own ethnic groups (Putnam, 2000). Putnam writes, "for other issues – such as deciding what sort of safety net, if any, should replace the welfare system – surely it is social capital of the most broad and *bridging* kind that will most improve the quality of public debate" (p. 363).

Dr. John VanDenBerg developed the wraparound (WA) process for clinical adolescent psychology programs in Alaska. Dr. Eric Bruns from the University of Washington School of Medicine has conducted many studies of the wraparound process in this context. Bruns finds that participants of a WA program in mental health continue to live in the community while youth receiving traditional services are placed outside their communities in more restrictive settings (Walker & Bruns, 2006). It was not until recently that John Katov introduced the WA process as an antipoverty program called The Open Table in Phoenix, Arizona. Katov believes that a small

group of properly trained mentors can equip a brother or sister by empowering them with relational asset models to help them create new solutions for their challenges (Katov, 2018).

The Open Table model uses a community-based grassroots approach to capitalize on the relational, intellectual, and social capital of communities to transform poverty. Each table consists of six to nine volunteers that commit to one year of weekly meetings with a brother or sister to encourage and connect, develop friendships with the table members, and follow the plan, which they themselves created with their table members (Katov, 2018).

Research Question

Are the current antipoverty programs effective in reducing generational poverty and the subsequent poverty rate? Many of the current antipoverty programs focus on transactional programs with financial or consumption-based resources. A small but rising group of individuals and organizations believe that a different model is needed. Their idea would come alongside individuals suffering in poverty by employing social capital (SC) in a WA poverty intervention approach thereby reducing generational poverty. The research evaluated if a WA poverty intervention model leveraged SC to reduce poverty.

Purpose of this Research

This study sought to research if applying SC effectively alleviates poverty. More specifically, the study sought to understand if a person who learned how to rely on SC exited generational poverty and continued to use SC to remain out of poverty if a crisis occurred. The preponderance of the research regarding poverty intervention focuses on income or transfer programs. There is a paucity of research focusing on the effects on poverty by transferring SC. Due to the lack of research available, this researcher pursued an unresearched theory to explain the effects of SC programs on the impoverished.

Research Method

In order to explore this question, the research used a qualitative phenomenological grounded theory approach. Grounded theory focuses on the participants' stories, their words, and their definitions of success. Grounded theory is the lead option in methodology as it focuses on building theory to understand a phenomenon.

All individuals who participated in this study had lived on the poverty scale prior to their poverty intervention program and had stated they are successful in coming off the poverty scale. Inclusion in the study was determined by their ability to stay on course to exit poverty after a setback occurred. The research studied participants from a wide variety of demographics and from various parts of the nation. A grounded theory qualitative research provided an understanding of poverty and successes from the individuals' perspectives who once suffered from poverty's effects, and an understanding of how SC reduces or eliminates poverty.

Chapter 2 – Literature Review

Background

The effects of the Great Depression resulted in the economic debilitation of a nation with high rates of poverty. After feeling those effects for several decades, President Lyndon B. Johnson declared a ‘War on Poverty’ as part of his Great Society initiative and created the Office of Economic Opportunity and signed the Economic Opportunity Act (Johnson & Mason, 2012). President Johnson hoped to break the generational poverty cycle by helping the impoverished population develop job skills, further their education, and find work. The War on Poverty moved poverty into the “front lines” of American policy in order to eradicate it. Its mission was to raise the impoverished living standards and allow the impoverished population to become self-sufficient by raising their income to match the mainstream (Mitchell, 2018). The official poverty rate at that time was 19 percent (Johnson & Mason, 2012).

Mollie Orshansky developed the original poverty thresholds. Orshansky grew up in poverty as a daughter of immigrants and later became a food economist with the United States Department of Agriculture (Fisher, 2008). She developed the USDA’s 1955 Household Food Consumption Survey while serving as a social science research analyst in the Division of Program Research at the Social Security Administration, and later used it to calculate a multiplier for the poverty thresholds used in the War on Poverty (Fisher, 2008). Orshansky’s model originally identified a low-cost food plan for a retired elderly couple and the minimum budget required for them to survive if they used one-third of their income for food. Her budget included medical care, number of physician visits per year, and practices of setting fee scales in large cities (Fisher, 2008). Without a generally accepted measure of poverty, she developed her own while working on a project “Poverty as it Affects Children,” and published her findings in the Social Security Bulletin (Fisher, 2008). Mollie Orshansky’s thresholds were based on food

consumption of the cheapest hypothetical food budget that could provide a nutritious diet. She calculated that families spent one-third of their after-tax income on food in 1955 (Fisher, 2008). Subcategories included two-person and one-person units, farm and nonfarm status, gender of the family head, number of the family who were children, and age (Fisher, 2008). The result was 48 detailed poverty thresholds reduced from 124 that she had originally created, weighted by each family subset.

In 1965, her study extended to the entire population and was published as “Counting the Poor: Another Look at the Poverty Profile.” The Office of Economic Opportunity (OEO) working for President Johnson used her thresholds defining them as “second generation definition of poverty,” and issued the Poverty Guidelines to determine eligibility for government programs (Fisher, 2008). OEO officially adopted her extended thresholds of poverty model as the federal government’s Official Poverty Measure (OPM) for statistical, planning, and budget purposes in 1969 and provided a means to identify the groups in our society with the least resources. The program was transferred in 1981 to Health and Human Services by the Omnibus Budget Reconciliation Act and adjusts for federal noncash programs (Fisher, 2008).

Since 1964, trillions of dollars have been spent in government programs, and millions of charity hours volunteered through churches, civil service organizations, and non-governmental agencies, all spent tackling the poverty issue with what seems to produce little or no substantial decrease in poverty (Mitchell, 2018). However, other research contests this notion and argues that using more realistic measurement indices, poverty has decreased since the war began (Meyer & Sullivan, 2012). Subsequently, the ways to establish poverty thresholds and to develop solutions via an antipoverty policy approach have changed substantially throughout the decades. With many sides attempting to fight poverty, they appear to contradict each other’s efforts in reducing deprivation in society. Implementing the War on Poverty, programs were fraught with

administrative confusion and overlap, insufficient funding, inadequacies, and corruption (Blair, 1969). Unfortunately, due to the mismeasurement of poverty and the inability for bureaucracy to react in a timely fashion, surfeit dollars are dedicated to ineffective education and intervention programs (Meyer & Sullivan, 2012).

Poverty Effects

In their study of how urban poor community leaders define and measure poverty, Boonyabancha and Kerr discuss nine causes of poverty: being born into poverty; debt; ill health and accidents; larger families that cannot be supported; disasters; migration from rural poverty; evictions; laziness; and structural injustice (Boonyabancha & Kerr, 2015). Some of these listed would classify as situational poverty but are not exclusive of generational poverty.

If not addressed, poverty can threaten economic, social, psychological, and health progress and increase gaps between socioeconomic classes. Increasing disparities create conflict and tensions resulting in protests and property destruction without redevelopment (Morris, Santos, & Neumeyer, 2018). Additionally, impoverished communities have reduced educational achievements (Ransdell, 2012). Assessing children and their educational challenges due to poverty is cumbersome. Schools receive government assistance in order to provide educational materials as well as free or reduced rates for lunch; they also receive donations from local charity or church organizations. How are scarce resources targeted to the most in need (Short, 2016)?

In economically deprived areas, the unemployment rate is already high with the trend of this population being transitional, in jobs that require low skill or offer minimum wage (Morris, Santos, & Neumeyer, 2018). During the course of a business cycle, the poor will be the last hired and the first fired due to their lack of education, skills, and investment in human capital (Jefferson & Kim, 2012). Poverty programs that provide a noncash safety net increase more in correlation to an increase in unemployment (Jefferson & Kim, 2012).

Over time, a lack of education, opportunities, or employment can create an environment in which poverty reinforces itself in physical, psychological, and behavioral challenges (Morris, Santos, & Neumeyer, 2018). A low socioeconomic environment perpetuates a cycle of poverty in a family, or a poverty trap in a community (Morris, Santos, & Neumeyer, 2018). A persistent poverty state contributes to a learned helplessness (Morris, Santos, & Neumeyer, 2018). Here, Morris, Santos, and Neumeyer state, “such a sense of helplessness can give rise to living only in the moment, irresponsible spending, not saving even if one could, and not responding to incentives when they are offered. The bottom line is that the person loses hope” (2018, p. 8).

Changing Poverty Measurements

We return to the question, ‘What does it mean to be poor?’ Is there a consensus or consistent definition of poverty? Thresholds to evaluate poverty within the United States adjust to different philosophical approaches. Prior to 1964, measurement of poverty was absolute in relation to the ability economically to meet basic needs such as food, clothing, and shelter (Morris, Santos, & Neumeyer, 2018). Economists refer to this as the Absolute Poverty Measure (APM). The OPM developed by Orshansky measured the basic needs of an individual, couple, family, and the elderly, and has been updated only for inflation in subsequent years (Chaudry, et al., 2016). The APM is useful for identifying the effects of costs in relation to spending as well as changes in material circumstances of the population (Meyer & Sullivan, 2012). Examples of this adjustment are computers and cellphones. In 1990, computers and cellphones were considered luxury items, yet now may be considered necessities (Meyer & Sullivan, 2012). APM was too static. Analysts developed and used another measure, Relative Poverty Measure (RPM), in order to consider a person’s quality of life in comparison with society (Meyer & Sullivan, 2012). However, when income levels increase due to economic growth, the level to assess RPM

increases as well, indicating relative poverty remains an issue (Morris, Santos, & Neumeyer, 2018).

Subsequently, the U.S. Health and Human Services added the Supplemental Poverty Measure (SPM) in 2009 and the Alternative Poverty Measure in 2012. The SPM accounts for tax credits and noncash benefits or entitlements families receive. SPM is updated as spending on basic necessities changes among lower income families (Chaudry, et al., 2016). The SPM accounts for in-kind benefits and expenses in the calculation of resources using data on expenditures for food, clothing, shelter, and utilities in calculating poverty thresholds adjusted for geographical difference in housing costs (Jefferson, 2012). The Alternative Poverty Measure was developed by researchers from Columbia University applying SPM to all poverty groups between 1967 and 2009 (Chaudry, et al., 2016).

The previous three measurements (OPM, APM, and RPM) are based upon income as the measure of resources (Meyer & Sullivan, 2012). Meyer and Sullivan suggest a more precise Consumption-Based Poverty Measure (CPM), and they argue that CPM provides a better predictor of deprivation than income (2012). Using their previous studies, hardship and adversity are more severe if consumption, rather than income, is low (Meyer & Sullivan, 2012).

Governmental transfer programs that provide food stamps or temporary assistance for needy families and other consumption programs are more accurately reported than income according to Meyer and Sullivan (2012). Regardless of how we assess poverty, income is the most effective means to determine program eligibility (Meyer & Sullivan, 2012).

Federal, state, and local governments focus their antipoverty policies and programs on raising the quality of life of the poor and subsequently adjust the poverty scale. OPM and APM were income-based, which evaluate the ability to spend and acquire resources. Orshansky's thresholds drew a line at the level of necessary income to survive. Anyone below the poverty line

was considered 'poor,' and everyone above the poverty line was deemed middle class or wealthy. Antipoverty policies were introduced to reduce poverty's burden on society based upon this line. Since the War on Poverty, rotating administrations adjust how agencies measure and adjust poverty thresholds based upon their political and policy philosophies. A political leader's hope is that by significantly changing indices, antipoverty policies and their budgetary approach to antipoverty programs will reduce the poverty rate during their time in office. The result has been an increasing number of governmental programs, non-profit agency assistance, healthcare accessibility, and numerous changes in tax codes.

The changing definition of poverty creates difficulty in establishing stable and effective antipoverty policies and programs. Local, state, and federal leaders have difficulty in emplacing antipoverty programs during their tenure. Politicians develop their views on poverty and adjust their campaigning based upon their understanding of the effects. Understanding of poverty becomes relational and by default, results in comparing one's circumstances to others more fortunate. Although the RPM is an intersubjective, evolutionary statistic, it remains at 50 to 60 percent of the median income (Yamamori, 2017). RPM rises as the wealth of a community rises, always leaving a section of the population in poverty.

Adam Smith warned of using conditions of deprivation relative to others by using silk shirts and leather shoes as examples. In order to highlight this principle, we can use examples of cars, computers, and smartphones today. Individuals who cannot afford a computer are considered as relatively poor compared to those who have several computers in different rooms of their home. However, an individual who cannot afford a computer is not merely lacking a luxury item enjoyed by those with wealth. Society has advanced to the point where a computer has become necessary for advancing education, applying for jobs, and receiving

communications. A computer was a luxury ten years ago, but it has evolved to become a necessity.

While not being able to afford a computer is a relative failure of income compared to society, the failing to obtain necessary education for job skills is an absolute (Yamamori, 2017). Without the tools, the cycle of poverty is exacerbated. Lacking a car can have the same effect depending on rural or urban settings and the ability of the community to provide public transportation.

Looking at RPM creates difficulty in discerning between needs of nature and needs mandated by customs (Yamamori, 2017). Lack of material possessions creates a feeling of inadequacy, and if perpetuated generationally, actual inadequacy. As Yamamori points out, that effect is devastating to both economic outlook and the sense of position in society, to the point of feeling excluded (2017). Instead of income indices, public leaders' confusion of RPM causes their antipoverty policies to default to obtaining material resources. National antipoverty programs further entrench a social welfare state while attempting to pepper local nonprofits with an occasional minuscule dosage of work skills programs using federal subsidies (Darity, Lopez, Ajilore, & Wallace, 2012). During an informal discussion with a city council member of a mid-size town in Virginia, the council member told this researcher someone who he considers poor is someone without televisions (multiple), vehicles (multiple), or a garage. At what point would society determine RPM was satisfied and no one was considered poor? Yamamori suggests that would be when an individual's capability to move about society was not affected and that they were not ashamed to appear in public (2017).

According to the Heritage Foundation, as of 2016, the current national aggregate expense since the Johnson administration declared the War on Poverty is over \$27.8 trillion (Rector & Vijay, 2018). However, a report from the Cato Institute declares that even with trillions of dollars

and over 50 years focused on ending poverty, the U.S. poverty rate remains above 15 percent with the lowest poverty rate within the first few years of President Johnson's war on poverty declaration (Tanner, 2014). President Johnson declared we would not rest until the war was won. The poverty rate then was at 19 percent (Johnson & Mason, 2012). In 50 years and after spending \$27.8 trillion, the poverty rate has declined roughly four percent.

According to a March 2016 report from the U.S. Department of Health and Human Services, this "demonstrates the clear positive impact of the evolving social safety net on the economic well-being of individuals and families during the past 50 years," and "subsequent initiatives and programs substantially reduced the level of poverty in the United States and provided critical supports to improve the lives of the most vulnerable..." (Chaudry, et al., 2016, p. 2). Interestingly, the bottom 20 percent of families on the Income Distribution chart averaged \$15,000 in 1966; \$17,000 in 1990; and \$16,000 in 2014 (Chaudry, et al., 2016). Adjusted for inflation: \$118,928, \$33,696, and \$17,224 respectively. The war on poverty continues.

Most programs that focus on individuals in poverty provide a crisis response to a chronic issue. Many organizations focus on clothing, shelters, food pantries, and urgent financial assistance to pay bills. Government programs focus on supplemental financial programs such as Women, Infant, Children (WIC) and food stamps. The Headstart program focuses on education believing that early education will combat poverty. Education focused on skills training is consistently the greatest contributor to an individual moving out of poverty (Morris, Santos, & Neumeyer, 2018) and (Putnam, 2000). However, the poverty rate holds steady. Very few organizations are breaking the mold of acute responses to the chronic issue of poverty. Those few are attempting to think outside the box in tackling this overwhelming issue.

Many of the major antipoverty initiatives of the last few decades are not reflected in the poverty rate, because policies like a rise in the Earned Income Tax Credit, a more generous Child

Tax Credit, and expansions of Medicaid and food stamps do not show up as a pretax money income. Means tested transfer programs that are reported in the Current Population Survey are low and declining (Meyer, Mok, & Sullivan, 2015). Additionally, 36 percent of those who graduate out of the poverty roles return to poverty within four years due to a triggering event such as a job loss, reduction in or loss of income, divorce, changes in family structure, or a medical emergency affecting their family (Morris, Santos, & Neumeyer, 2018).

Poverty Intervention

The government has taken the lead role in antipoverty policies that hold strongly to three strategies: aggregationist, alleviative, and curative (Anderson, 1967). Although the government used all three initially, curative programs have declined. Simply put, the aggregationist strategy involves broad fiscal and monetary policies to maintain a high level of economic intervention for growth and employment. This assumes that poverty is the product of a lack of employment opportunities for the individual or the individual has a lack of skills required for employment.

The alleviative strategy relieves the hardships or misery by providing financial and material aid for a short or a long-term basis. It assumes that public aid is necessary to protect the individual's dignity while compensating for lack of employment and providing public assistance programs, Medicaid, or some sort of transfer program (Anderson, 1967).

Curative strategy focuses efforts on helping the poor become self-sufficient through education or changes in their environment. President Johnson, known for being crass, stated the goal was, "to make taxpayers out of taxeaters" (Anderson, 1967, p. 75). Curative programs were educational, developed trade skills, and focused on literacy training (Anderson, 1967).

An example of a curative strategy was the Appalachian Regional Development Act of 1965. As part of the Economic Development Act, the federal government spent \$1.1 billion over five years to encourage the economic development in eleven states from northern Pennsylvania

to mid-Alabama. This region was described as the victim of both geography and automation and lagged behind the rest of the nation in employment, healthcare facilities, education, and housing (Anderson, 1967). In order to promote a social and economic lift in the area, the federal government placed a majority of the funding on economic development through construction of highways and roadways to improve commerce into their localities (Anderson, 1967). The remainder of the funding focused on healthcare facilities, vocational schools, land grants, reclaiming mined areas, and developing timber and water resources (Anderson, 1967). Despite these efforts, today, many people in the Appalachian area have not escaped generational poverty.

Many governmental agencies and policy makers have had to adjust their approach to antipoverty programs due to the fluctuating poverty indices that changed from the 48 thresholds of the Original Poverty Measure (OPM) to the Supplemental Poverty Measure (SPM) and Consumption-based Poverty Measure (CPM). In their attempt to show effectiveness of their administration's antipoverty policies, they came to realize later that their poverty measurements were incorrect and required adjusting.

The literature is filled with examinations of poverty. Some question whose fault it is that there are poor, even while seeking solutions to the problem. According to Amartya Sen, money is only a means to an end to purchase goods and services; therefore, poverty should be defined in terms of failure to achieve what society considers acceptable (B.S. Turner (Ed.), 2006). Societal labels applied to this population become mantra used against them. They are considered powerless and are categorized as socially excluded, poor, and underclass (B.S. Turner (Ed.), 2006). Yet, poverty is a situation of a person, not their character (Morris, Santos, & Neumeyer, 2018). For decades, a voice of a different approach has called for social responsibility and action instead of a fiscal approach.

Within five years of the Johnson administration's declaration of war on poverty, Blair stated, "We will need to change, if not reverse, the way we have traditionally looked at the world's have-nots" (1969, p. 685). She also stated that we will have to work towards a system that provides opportunity for mobility requiring "a significant measure of responsibility" (1969, p. 689). Blair (1969) contends that the voice of those affected by poverty is stifled and we need to incorporate them into policy development to fight government initiatives that unintentionally embitter them and reduce their voice.

Putnam (2000) describes philanthropy in the United States as generous and that as members of society, we have a civic duty to show compassion to the population suffering in a cycle of deprivation. He states that according to Andrew Carnegie, wealth is a sacred trust and we are obligated to use it for the good of the community (Putnam, 2000).

There is limited research on the impact of any social psychological variable involving Social Capital (SC) in alleviating poverty. Most research shies away from analyzing an individual's level of drive, ability to foster relationships, find mentors, or display initiative to produce significant results (Morris, Santos, & Neumeyer, 2018).

Social Capital

Despite the economic growth since 1964 when Johnson declared the War on Poverty, the poverty rate has remained within a few percentile points of the original number. Persistent poverty can be attributed to several contributing factors. Pervasive poverty leads to hopelessness (Morris, Santos, & Neumeyer, 2018), and generational poverty continues to perpetuate a cycle of deprivation (B.S. Turner (Ed.), 2006). Cumulatively, the change in family dynamics and the rise in government programs are not sufficient to determine why the poverty rate remains stagnate (Johnson & Mason, 2012).

Conversely, government programs that are designed to help the poor, but lack a human capital component are likely to continue to exacerbate poverty (Darity, Lopez, Ajilore, & Wallace, 2012). According to Johnson and Mason (2012), social capital and social exclusion are worth future studies to assess poverty and develop antipoverty programs based upon these principles. They further suggest that a proper analysis of poverty requires an examination into an individual's level of aspirations, not income (Johnson & Mason, 2012). When antipoverty programs focus on income, they result in government transfer programs that decrease incentive to earn income through employment (Johnson & Mason, 2012). An individual's lack of social-group membership correlates to an exacerbation of poverty as the individual becomes more marginalized and socially isolated (Johnson & Mason, 2012). Can developing social capital generate a positive outlook and reduce poverty?

What is social capital? Social capital is the principle of generalized reciprocity (Putnam, 2000). Putnam quotes Tocqueville when he visited the United States and was amazed how Americans did not take advantage of each other but looked out for their neighbors (2000). He stated that democracy works for us because Americans were not selfless but had rightly understood our self-interest (Putnam, 2000).

Social capital (SC) is the advantage derived from a structure of relationships (Scheffler & Brown, 2008). Economist Jane Jacobs coined the term social capital to define the effects of human capital-based theories on distribution of earnings (Scheffler & Brown, 2008) (Johnson & Mason, 2012). She referred to it as Value of Networks (Scheffler & Brown, 2008) and argued that individuals networking together are far more effective than top-down efforts of governments or large corporations (Scheffler & Brown, 2008). The idea is for the community or group to wraparound the issue and help solve problems such as poverty.

Economists have applied the principles of SC to several subjects, including carpooling and micro financing (Charles & Kline, 2006). Researchers widely agree that SC has characteristics of *bridging* or *bonding* (Putnam, 2000) and (Scheffler & Brown, 2008). SC makes information available to community members, helping improve their health and economic decisions (Scheffler & Brown, 2008). SC affects health (primary focus) and economics (poverty) (Scheffler & Brown, 2008).

In order to conceptualize SC, the individual would need to view relationships as resources and develop relationships with others who are outside of poverty. The individual would develop these relationships into a quality network to be accessed in order to obtain specific outcomes. These relationships are an investment that yield positive returns without creating dependency upon anyone, any agency, or government. In other words, as Johnson and Mason (2012) state, “social capital involves the social and economic spaces in which individuals reside and which provides them with certain group interactions, networks, and resources that help to inform their strategic actions that provide access to public and private resources.” As a result, SC is hard to measure. It lacks empirical evidence because it is based on trust and does not comment on an individual’s values or behavior (Johnson & Mason, 2012).

SC is a powerful resource for advancing in employment, obtaining resources, and acquiring support (Putnam, 2000). Individuals suffering in poverty regain optimism when there is a sense of progress and new possibilities while reaching within their social network (Morris, Santos, & Neumeyer, 2018). Areas with high SC are producers and can alleviate poverty (Putnam, 2000).

The benefits of SC are profound. It improves decisions, provides encouragement, improves accessibility, increases services, and provides psychosocial support networks to mitigate stress, improve health, and foster better mental health (Scheffler & Brown, 2008).

Relationships are a critical part of society and economics. Economist James Coleman suggests rational choice occurs with rich SC (Scheffler & Brown, 2008). Investment into SC transformed Lawndale, a neighborhood in Chicago that was once thought irreclaimable (Scheffler & Brown, 2008). A local minister created a neighborhood using SC, extending their social networks and fostering growth and renewal.

In the book *Bowling Alone*, Putnam addresses the socioeconomic and SC benefits on society. However, he does not address the use of this method in poverty eradication. He skirts the idea in his discussion on philanthropy, but he does not address poverty specifically (Putnam, 2000). Communities like Woodlawn, Los Angeles and Lawndale, Chicago have used the SC concept. Unfortunately, there is a gap in the research that focuses on their use of SC in poverty alleviation. In the book *When Helping Hurts*, the authors take a different approach in breaking the poverty cycle. They focus on broken relationships and broken systems (Corbett & Fikkert, 2009). In an indirect way, they discuss using SC and building relational assets. Given these two books and the failure of an economic systemic approach to alleviate poverty, this study explored a key question: does the transfer of SC reduce poverty? Quoting Blacksher, Morris states, “At the individual level, the sense of being marginalized and not belonging, feeling dependent and not in control of one’s destiny, or believing that one is unworthy might be prevalent” (2018, p. 9). Is there an antipoverty program that connects an individual with mentors using SC in order to instill hope and self-worth that will provide them the opportunity to exit poverty?

The Open Table

One of the few programs that uses SC to end generational poverty is called the Open Table, not to be confused with the restaurant reservation service application for a smartphone. The founder of the Open Table, Jon Katov teamed up with Dr. John VanDenBerg to utilize a WA

process (VanDenBerg, Bruns, & Burchard, 2008) and the Theory of Change methods in increasing someone's SC and relational assets in tackling the poverty issue.

Dr. Lenore Behar coined the term wraparound (WA) in the early 1980s to describe the application of an array of comprehensive community-based services to individual families concerning adolescent psychology in North Carolina (VanDenBerg, Bruns, & Burchard, 2008). WA has become common shorthand for flexibility and comprehensiveness of service delivery, as well as for approaches that are intended to help keep children and youth in the community (VanDenBerg, Bruns, & Burchard, 2008). A WA approach develops normalization with support from community members to keep individuals with complex needs in the community (VanDenBerg, Bruns, & Burchard, 2008).

Katov's methodology in The Open Table claims to end generational poverty for a family. His model, which he calls a movement, identifies an individual in poverty who then engages with a local group of six to nine mentors who meet weekly for one year. These individuals are called brothers or sisters in order to create a family atmosphere in the meetings. After 52 meetings, the sister or brother from the yearlong program is on track to exit the poverty role.

The Open Table's model is about fostering long term and close relationships of the participant with the other table members to build a network of community resources (Table, 2019). Additionally, their model claims that the people in poverty will build SC and networking skills in order to manage life's problems and build a better life for themselves (Table, 2019). Lastly, the purpose for the Open Table model is to create independence and hope for the future for the participant (Table, 2019).

Katov boasts that the Open Table enjoys a 95% success rate for those on track to exit poverty as categorized by being self-supporting or confident that they will be in the future (VanDenBerg J. , 2015). In 2013, the City of Phoenix calculated the Open Table's impact: the

families served increased their financial well-being by 744% on average (VanDenBerg, Mrozowski, Teitsma, & Marks, 2019). Additionally, over 95% of the Open Table graduates remain in contact with their table members; 85% had a better job or were advancing their education; and 95% were now optimistic about their future ability to be self-supported (VanDenBerg, Mrozowski, Teitsma, & Marks, 2019). These statistics are surprisingly optimistic considering the poverty rate in these areas has flat-lined or is increasing.

The Open Table conducted an internal study with 20 graduates to assess effectiveness. Their website publishes their studies and a brief video summary (Table, 2019). Because Katov uses SC as his model, his approach produces a long-term or longitudinal phenomenon. This simple approach to ending generational poverty is later tested when a graduate faces a crisis and must rely upon their network to maintain or regain momentum and avoid returning to poverty's dire circumstances. This process is unique and merits more substantial or external research.

There is much data regarding the causes and impacts of poverty, as well as antipoverty programs. Thousands of articles, books, and presentations share the latest of theories. However, there is a paucity of research that identifies the effects of SC in poverty intervention. Because poverty indicators are economically based, and local, state, and federal governments create policies attempting to reduce poverty, most research focuses on economic indicators in poverty intervention policies. Poverty intervention programs approaching solutions while looking outside economic factors are rare.

Chapter 3: Methodology

The purpose of this study was to determine if poverty intervention programs using social capital and relational assets, which have generated initial success with an impoverished individual, continue to enable success when setbacks occur. During this study, participants were interviewed in order to capture their own definitions of success as current economic indicators view it. In doing so, the researcher used a qualitative phenomenological study developing a grounded theory that identified the factors that contributed to a participant's success in alleviating poverty and recovering after setbacks occurred.

The Question and Research Design

Many researchers focus their work on antipoverty programs that are acute transactional solutions such as soup kitchens, food distribution ministries, shelters, or other responses to generational poverty. Additionally, scholars have examined the wraparound (WA) method using social capital (SC) methodology primarily applied in adolescent counseling (Walker & Bruns, 2006). Dr. John VanDenBerg, Ph.D., who now consults for the Open Table, developed the WA method. WA theory utilizes SC, social connectedness, and a relational asset model. Does the WA method end generational poverty by creating a network of support and hope that transcends a crisis that occurs within two years of graduating the program? In order to explore this question and develop on the theory of change for future studies, the research needed to use a qualitative phenomenological grounded theory approach. Grounded theory focuses on the participants' stories, their words, and their definitions of success. Did participants see themselves as graduates and off the poverty roles? A qualitative research methodology helps the researcher and, later the community, understand their story and the causes for their successes. Grounded theory currently was the lead option in methodology as it focuses on building theory to understand a phenomenon. This study sought to fill the gap in literature researching WA poverty intervention

by developing a theory of how the Open Table works based upon the lived experiences of participants.

Phenomenology is mainly interested in the "lived experiences" of the subjects of the study, meaning subjective understandings of their own experiences. The goal was to answer a specific research question about the experiences of the participants. Grounded theory looks at experiences and as many other data sources as possible to develop a more objective understanding of the subject of the study. The goal is to develop a model or explanation of the meaning of the study (Morrow, Rodriguez, & King, 2015). By using both the phenomenology and grounded theory, the research is both philosophical and sociological.

Grounded theory is a qualitative research method that dives into the subject rather than going around it (Charmaz, 2004). The researcher must systematically collect data and rigorously analyze it while developing a theory (Corbin & Strauss, 2008). By entering the phenomenon, the researcher is fully present during the interview and inside the content afterwards (Charmaz, 2004). This researcher is not an ethnographer; however, the study showed an active involvement with data shaping the analysis. Lastly, a grounded theory study presents the viewpoints and actions of people who experience the phenomenon (Charmaz, 2004). Grounded theory is the most comprehensive study for this research because it addressed both the scientific and creative aspects of qualitative research (Corbin & Strauss, 2008). It was this researcher's intent to follow the guidelines so that the research was credible, useful, original, and so that it resonated (Corbin & Strauss, 2008). Additionally, Corbin and Strauss warn the researcher to avoid bias while maintaining academic rigor (2008, p. 300).

Academic rigor is preserved by the researcher ensuring credibility by following eight guidelines (Chiovitti & Piran, 2003). First, the researcher allowed the participants to guide the process. Second, the researcher checked the theoretical construction generated against

participants' meaning of the phenomenon. Third, the researcher used participants' actual words in the theory. Fourth, the researcher articulated the researcher's personal views and insights about the phenomenon explored by means of (a) post comment interview sheets used as a tool; (b) a personal journal; and (c) monitoring how the literature was used (Chiovitti & Piran, 2003). Fifth, the researcher specified the criteria built into the researcher's thinking. Sixth, the researcher specified how and why participants in the study were selected (Chiovitti & Piran, 2003). Seventh, the researcher delineated the scope of the research in terms of the sample, setting, and the level of the theory generated. Eighth, the researcher described how the literature relates to each category, which emerged in the theory (Chiovitti & Piran, 2003).

In addition to the above guidelines developed by Chiovitti and Piran, (2003), Paul F. Colaizzi created a distinctive seven-step process in ensuring rigorous analysis while staying close to the data (Colaizzi, 1978). The key to validation of the research is involving participants and returning the analysis of their transcription for review of their input (Alzayani, 2015). Colaizzi's seven steps are (Morrow, Rodriquez, & King, 2015):

1. Transcription and familiarization. The researcher will familiarize himself with the data by reading through all of the participant accounts repeatedly.
2. Identify and extract significant statements. The researcher will identify all statements that provide a direct relevance to the phenomenon.
3. Create formulated meanings. The researcher identifies meanings relevant to the phenomenon that arise from a careful consideration of the significant statements by bracketing presuppositions of the phenomenon experienced.
4. Aggregate formulated meanings into cluster themes. The researcher clusters identified meanings into themes that are common across all participants' experiences. Attempt to avoid influence of existing theory.

5. Develop an exhaustive description. The researcher writes a full and inclusive description of the phenomenon, incorporating all the themes.
6. Identify and produce the fundamental structure of the phenomenon. The researcher condenses the exhaustive description down to a short, dense statement that captures just those aspects deemed essential to the structure of the phenomenon.
7. Return to participants and seek verification of the fundamental structure. The researcher returns the fundamental structure statement to all participants and asks whether or not it accurately captured their experience. The researcher modifies as necessary earlier steps in the analysis based upon the participants' feedback.

Instrumentation

The Open Table conducted initial assessments for participants by administering a Readiness to Change survey (see Appendix C) adapted from Dr. James O. Prochaska Stages of Change assessment. If the candidate tested Pre-Contemplation or Contemplation, they were assessed as not ready. Candidates who tested as Preparation or Action were assessed to benefit from the Open Table model. The research formed a basis for the interview questions from the Open Table Readiness to Change Survey and used additional questions as a guideline found in the Theory of Hope - The Trait Hope Scale (Snyder, 2002). In 2002, Snyder introduced the Theory of Hope Scale (See Appendix A) to qualify hope as a perceived capability that motivates individuals towards achievement (Snyder, 2002). His study focused on academics, athletics, physical health, psychological adjustment, and psychotherapy. According to the Theory of Hope, false hopes are based on poorly chosen goals and bad planning (Snyder, 2002). Additionally, low or no hope exacerbates poverty, poor health, and increases mental health issues (Snyder, 2002). The researcher developed 21 research questions used in a semi-structured interview process to determine an individual's motivation to recover from a crisis and remain out of poverty.

The Trait Hope Scale does not address the impact of WA poverty intervention techniques. There is not an established phenomenon other than the one-year intervention by mentors providing counsel, guidance, friendship, relationship, and supports. The Open Table is a network of individuals that encourage and come alongside a brother or sister as each provides solutions to his or her own situation matching the personal goals established in the first few weeks of their Open Table experience. This study incorporated interview questions for the participants to explain their successes in order for the researcher to further understand the program.

The researcher developed the questions and conducted face-to-face interviews in person or through a video teleconference platform. This study used a semi-structured interview (Drever, 1995) series of questions developed prior to the meeting (see Annex B). The structure remained flexible and allowed the interviewer the freedom to pursue themes of descriptive questioning based upon the participants responses to the questions (Longhurst, 2010).

The study attempted to understand how the program worked using SC and relational assets. It reviewed the successes of participants in a WA poverty intervention model. The research documented the journeys of individuals who participated in a program, who were considered successful, and who were able to access relational assets and SC when a crisis occurred.

Study Population “Brothers and Sisters”

The Open Table refers to their constituents as Brothers and Sisters. According to their website:

“Open Table refers to the person being helped as a Brother or Sister to ensure that everyone understands that this person is not a child to be parented or a client to be served as part of your job. He or she is someone with whom you are willing to be in relationship. It was taken from Dr. Martin Luther King’s quote saying, *‘All life is interrelated. The agony of the poor impoverishes the rich; the betterment of the poor enriches the rich. We are inevitably our brother’s keeper because we are our brother’s brother. Whatever*

affects one directly affects all indirectly.’ However, a group or congregation may refer to the person they are helping in any way that all are comfortable.”

The research focused on individual participants of the Open Table Program who had graduated the program and within the past two years had experienced a crisis requiring them to utilize SC and relational assets. Crisis is defined as an event which required help or assistance beyond what the participant could provide with their own resources. Examples are an automobile accident, loss of housing arrangements, death of a family member, or loss of employment. The research questions that provoked a response were questions 17, 18, and 19.

Limitations exist attempting to contact those who did not graduate the program. Those that failed the program had not maintained contact with The Open Table. Those individuals may be incarcerated, homeless without a forwarding address, or have other reasons The Open Table cannot reach them. The researcher received the contact information for 30 graduates of the Open Table. The researcher stopped interviewing once saturation was achieved at (n=18).

Study participants were randomly selected regardless of their region, ethnicity, gender, or age. The only criteria for inclusion in the study were that the study participants 1) graduated the program, and 2) had a crisis happen within two years of graduation. Brothers and sisters had established their goals in the program and had completed their goals or were on their way to achieving them, e.g. obtaining their G.E.D., getting a house, attending community college, or obtaining a job. As a grounded theory study, the goal was to understand if and how WA poverty intervention methods provide sufficient education and support to address or alter generational poverty. Did this model teach the graduate how to access and use SC or relational assets to stay out of poverty when faced with a crisis, e.g. losing a job, death of a family member, or loss of transportation?

Ethical Considerations and IRB

This research required an ethical approach fundamental to qualitative research. The researcher submitted to the IRB at the University of Lynchburg to ensure compliance. Ethics in qualitative research protects the research participants to give them the confidence in the research collection and the willingness to share their experience without sacrificing the integrity of the research (Orb, Eisenhauer, & Wynaden, 2000). The three areas to protect the participants include data collection through interviews and personal files, data interpretation, and reporting the findings (Orb, Eisenhauer, & Wynaden, 2000). In qualitative research, ethical principles are primarily centered on protecting research participants and the guiding foundation to do no harm (GCU, Ethical considerations, 2019b). These guidelines are honesty, objectivity, respect for intellectual property, social responsibility, confidentiality, and non-discrimination. The Grand Canyon University Center for Innovation in Research and Teaching offers the following list of core ethical principles to protect the participants and the research (2019a):

- Respect for persons - Respect the autonomy, decision-making and dignity of participants.
- Beneficence - Minimize the risks (physically, psychologically and socially) and maximize the benefits to research participants.
- Justice - Participants should be selected from groups of people whom the research may benefit.
- Respect for communities - Protect and respect the values and interests of the community as a whole and protect the community from harm.

This researcher protected the participant from unethical practices and use of the data collected. Participants were afforded the right to be informed about the study, to participate freely, to withdraw at any time, to be provided an informed consent document, and the opportunity to review and verify the research to determine if it accurately captured their

experiences and voices (see Appendix D). Each participant's confidentiality was protected because each was assigned a numerical pseudonym in order not to reveal his or her identity. Pseudonyms are sufficient, as participants are from various locations throughout the country and in major cities such as Phoenix, Chicago, Dallas, Richmond, and Lynchburg. Each participant was informed of how the research will be published and how the researchers reframed their quotes in order to protect their identity (Orb, Eisenhauer, & Wynaden, 2000). The research maintained an audit trail in order for other researchers to critique or continue the study (Orb, Eisenhauer, & Wynaden, 2000). Therefore, participants knew that other researchers may review the process and the data, but their participation will remain anonymous (Orb, Eisenhauer, & Wynaden, 2000). In order to preserve justice for the participants, if the research identified a concept that is attributed to a participant, the researcher would request the participant's permission to use it (Orb, Eisenhauer, & Wynaden, 2000). The participants were randomly selected based on location. The research captured the voice of minority or disadvantaged groups when they were identified (Orb, Eisenhauer, & Wynaden, 2000). The research did not include children, mentally ill, elderly, or prisoner participants.

Data Analysis

The researcher used analytic induction or Phenomenological Grounded Theory to develop causal explanations of the phenomenon of SC poverty intervention programs. The study included 18 participants in which the research studied their narrative and the researcher used each case to build upon the last until the researcher identified a statement that fit all cases (Corbin & Strauss, 2008). The researcher used the Colaizzi seven step method to ensure validity (Morrow, Rodriguez, & King, 2015). The researcher transcribed the interviews and used axial coding to group related data together to reveal subcategories and themes from the participants' voices (Allen M. , 2017). The researcher constructed linkage between data to identify an

emergent theme in order for the researcher to make a theoretical claim of the data and report those findings (Allen M. , 2017) and (Corbin & Strauss, 1990).

Validity and Reliability

Qualitative research is subjective when interpreting and contextualizing the data (GCU, 2019a). The researcher followed a valid process for analyzing the data. The research must be credible, transferable, dependable, and confirmable (GCU, 2019a). In order to ensure credibility, the research used triangulation to crosscheck the information received from the participants. The researcher allowed the participants to review their input to ensure the research captured their voice. SC dynamics are used in other research. Therefore, this research determined whether SC is transferable to poverty intervention programs. In order to establish dependability, the research documented every aspect of the findings and changes and provided explanations of further findings. It would be ideal if other researchers could replicate the study (GCU, 2019a). The research was objective when evaluating the data.

Limitations and Delimitations

This study does not adequately capture community level SC. Individualized SC is determined by the level of trust, networking, group membership, or cooperation that an individual has in the larger society. For example, would she allow a neighbor to look after her children? The limitation is in how much an individual can trust her community. The research does not adequately capture SC as a group-level phenomenon.

Summary

The intent of this study was to identify and determine the effectiveness of poverty intervention programs that use WA methodology and SC to end generational poverty. This study used a grounded theory approach where 18 individuals were interviewed who had graduated out of a poverty intervention program, and within the last two years had had a subsequent significant

life event occur. The research developed a theory based on why the successes had been achieved, and why they remain successful using the participant's own voice.

Chapter 4: Findings

This study sought to research individuals who used Social Capital (SC) effectively to alleviate generational poverty. More specifically, the study sought to understand if a person who learned how to rely on SC exited generational poverty, and then continued to use SC to remain out of poverty if the participant experienced a crisis causing them to rely on resources outside of their own ability to provide. As stated in Chapter 1, there is very little research focusing on the effects on poverty by transferring SC. Due to the lack of research available, this researcher pursued an unresearched theory to explain the effects of SC programs on the impoverished.

In order to explore this question, the research used a qualitative phenomenological grounded theory approach. Grounded theory focuses on the participants' stories, their words, and their definitions of success. Grounded theory is the lead option in methodology as it focuses on building theory to understand a phenomenon.

Within that framework, and as was described in Chapter 3, the participants were selected from a program that uses SC in a Wraparound (WA) process of creating goals with the individual. The program identified using SC in a WA process was the Open Table, which originated in Phoenix, Arizona. The Open Table uses a WA approach for poverty intervention and works with hundreds of mission leaders running autonomous programs in 15 states across the United States.

Data Collection

Upon approval of the IRB, the researcher contacted the founder of the Open Table, Mr. Jon Katov, with the proposal to research Open Table participants who have graduated the program. His team of administrators sent emails and made phone calls to their mission leaders. Mission leaders are local table administrators responsible for establishing a table of peer mentors and for qualifying a participant using the Readiness to Change survey described later. Some of

the mission leaders contacted the researcher to clarify with the researcher the specifics of the research and to ensure confidentiality, and other mission leaders sent the researcher's contact information directly to their graduates. The researcher has no information on how many participants received survey information.

The mission leaders sent out emails and texts to their graduates of whom they had current contact information, providing the researcher's contact information for them to contact the researcher if they were interested in participating.

The Open Table and the mission leaders were blind as to who participated in the study. Each participant was interviewed individually either face-to-face or over the telephone. Although the study included two couples who were married, each person was interviewed separately from his or her spouse. The depth of the data provided deep insight into their phenomena. Once the participants granted permission, the researcher established a time to meet either in person, or through an internet-based video conference program that is free and confidential to the participant. The researcher took notes, and all participants granted permission to record the session. No demographic data were used for selection purposes.

All notes and recordings were stored in a locked cabinet in the researcher's home office. After the interviews were completed and transcribed, the researcher returned to the transcripts of their interviews in order to verify accuracy and completeness. No modifications were needed after their review. The disadvantage to semi-structured interviews is that the study does not allow for follow-up questions after the initial interview.

Data Analysis

The researcher used analytic induction or Phenomenological Grounded Theory to develop causal explanations of the phenomenon of SC poverty intervention programs. The study included 18 participants in which the research provided their narratives and the researcher

studied and used each case to build upon the last until the researcher identified a statement that fit all cases (Corbin & Strauss, 2008). The researcher used the Colaizzi seven step method to ensure validity (Morrow, Rodriguez, & King, 2015). The researcher transcribed the interviews and used axial coding to group related data together to reveal subcategories and themes from the participants' voices (Allen M. , 2017). The researcher constructed linkage between data to identify an emergent theme in order for the researcher to make a theoretical claim of the data and report those findings (Allen M. , 2017) and (Corbin & Strauss, 1990).

Constant Comparative Method

The researcher used the four stages of the constant comparative method from each successive interview: (1) comparing experiences, (2) integrating categories, (3) delimiting the theory, and (4) writing the theory (Glaser & Strauss, 1967). The researcher coded the data into as many categories as possible to identify common themes using the participants' own words. By comparing incidents, the researcher was able to focus on emergent properties of each category and unique situations became integrated. As the theory began to solidify, the researcher compared each of the participants' experiences to determine five emergent themes common to all of them. Lastly, the researcher inductively developed a theory using reasonable statements from the participants to determine their ability to exit poverty and avoid returning to poverty.

Sample

As discussed in Chapter 3, 30 individuals responded to participate in the survey. The original research design called for 25 participants. The researcher used a random number generator and selected 25 participants and placed them into an excel spreadsheet. The researcher sequentially contacted the participants in order from the list to arrange a meeting, either face-to-face or over the phone. The researcher stopped at 18 interviews because saturation was reached and clear similarities were observed without new emergent themes (Corbin & Strauss, 2008), see

Table 4.1. The participants lived in eight different states. The researcher traveled to various locations and conducted 11 in person interviews and 7 interviews using an internet meeting platform to record the phone calls. Participants by phone were sent a phone number and code for them to dial in to the session. All 18 participants were provided a consent agreement that was reviewed together with the researcher. Participants were also notified of the research parameters. Each of the participants consented to the researcher recording the conversation and each was assigned a pseudonym for this study.

The study design sought individuals who were impoverished, had graduated the program, and within two years of graduation experienced a situation requiring the individual to seek resources outside of their capabilities to solve the problem. The researcher notified the Open Table staff and they presented the requirements to their mission leaders and Table administrators.

All individuals who participated in this study declared they had lived on the poverty scale prior to their poverty intervention program and had stated they were successful in coming off the poverty scale. The research studied participants from a wide variety of demographics and from various parts of the nation. A grounded theory qualitative research provided an understanding of poverty and successes from the individuals' perspectives who once suffered from poverty's effects, and an understanding of how SC reduces or eliminates poverty.

These participants were asked a series of questions about their open table experience, about their outlooks past, present, and future in how they resolved and continue to resolve issues requiring resources outside of their capabilities, about how they valued and defined their successes, and about how they relied upon others for advice and support. The interview questions are presented in Appendix B.

In the research, the researcher elicited a participant's journey from poverty as he or she shared their story. Most participants started their story from their childhood, with two

participants starting their stories from their professional careers. The participants told their stories, and afterwards, the researcher coded their responses, gathering and analyzing them to determine emerging patterns. The participants defined their own successes, which was a subjective response. After analyzing the interview transcripts, five prevalent themes emerged from the axial coding process. This chapter examines these themes and presents them as a comprehensive foundation for their successes.

Table 4.1

Participant Demographic Information

Pseudonym	Other	#	Sex	Age	Ethnicity	Immigrant	Foster Care	Interview	Geographical Location
George		1	M	69	White			Phone	Southcentral
Gabriel		2	M	31	African American			In-person	Mid-Atlantic
Sherry		3	F	24	African	X		In-person	Southwest
Samantha		4	F	25	White		X	In-person	Southwest
Gary		5	M	27	Hispanic	X	X	In-person	Southwest
Graham		6	M	26	White		X	In-person	Southwest
Sofia		7	F	24	Hispanic	X	X	In-person	Southwest
Sarah		8	F	25	Hispanic	X	X	Phone	Southeast
Serenity		9	F	23	White		X	In-person	Mid-Atlantic
Scarlett		10	F	42	White			In-person	Mid-Atlantic
Savannah		11	F	29	White			Phone	Midwest
Stella		12	F	60	White			In-person	Northeast
Sierra		13	F	38	African American			In-person	Northeast
Griffin		14	M	23	African American			In-person	Mid-Atlantic
Gavin		15	M	32	White			Phone	Southcentral
Grayson		16	M	33	White			Phone	Midwest
Sadie		17	F	59	African American			Phone	Mid-Atlantic
Giovanni	Veteran	18	M	63	White			Phone	Midwest

As shown in Table 4.1, participants interviewed lived in eight different states and were geographically scattered throughout the country. Participant demographics were varied. Four participants were immigrants, six participants had aged-out of foster care, ten participants were females, and eight were males. Ethnicity varied as well. There were five African Americans (one

immigrant from Africa), three Hispanics, and 10 Caucasians in the study. Participant ages ranged from 23 years to 69 years.

Two study participants admitted they were financially comfortable even though they lived below the poverty threshold prior to their experience with their Table. George had received an inheritance, but he exhausted most of it and lives on social security. He said he was secure; however, as his health deteriorated, he found his need for more income increased. Griffin is a college student and is below the poverty threshold. His family is above the poverty threshold and supports Griffin. He did not appear to have any needs. When he arrived at the interview, he was well dressed, a manicured haircut, and the latest iPhone.

After conducting the first interview, the researcher realized the order of the questions needed to align more chronologically. From the second interview on, the order of the questions remained the same. The new order identified pre-Open Table, during Open Table, and post-Open Table. The new order did not impact the first interview and the subsequent interviews became more fluid and less choppy. When a participant was sharing their information for the first question, they would answer a few other questions in their story.

There are 34 children among the 18 participants. Sierra has seven children, and Sofia has four with plans for two more. Two of the participants partook in the Open Table with their spouses, Sofia and Gary, Grayson and Savannah. As noted previously, spouses were interviewed separately. Gavin was also married. All but one participant was currently employed, one was on disability, and five admitted to having significant debt ranging from under \$1,000 to over \$40,000. Six participants did not identify with any religious faith and 10 professed to be Christians. The other two are unknown. Religious identification was not a question asked, but some of the participants shared their beliefs during the first survey question, "Describe your

circumstances prior to participating in the Open Table.” Two participants did not feel they benefited from their experience with the Open Table.

The first interview question asked participants to share their story of life prior to starting their Open Table. Only five of the participants came from a two-parent home and most of these had parental issues of abuse, drugs, alcohol, or mental health diagnosis e.g. schizophrenia. The others lived in dysfunctional homes or were placed in several foster homes. Three grew up with extended family instead of parents and were raised by their grandmother or uncles and aunts.

Eight of the 18 admitted to being abused either sexually, physically, or mentally. Over 90% of the abuse was from a family member or a close friend of the family. Seven spent time in jail with five admitting they had multiple felonies. Each participant had finished high school with two earning their general education diploma (GED). One of the participants is a veteran from the military.

When questioning the second participant, Gabriel, “how successful do you consider yourself?” the participant asked the researcher, “On a scale of 1 to 10?” The researcher used this subjective scale for the remainder of the interviews. Each participant was asked a numerical score from 1 (low) to 10 (high) for how successful they considered themselves currently and why, followed by how successful they see themselves in the future and why. The next question asked where they saw themselves before the Open Table and why, and if they saw themselves before they participated in the Open Table achieving their current or future score (Table 4.2).

Each time they gave their subjective numerical value, the researcher asked why, and they offered more insights into their challenges and successes during each phase. When comparing the pre and post Open Table success, all but one (Sadie) who responded with a numerical value shared an increase post Open Table and defined their outlook as “drastically different” or “night

and day difference.” Sadie had health issues and had to stop volunteering, resulting in a reduction of her score. She is hopeful she can return to work.

This adjustment did not affect the first interview with George as he had already commented about his life before, during, and after the Open Table. He attributes a significant life change for the better to his Open Table experience and he is 68 years old.

Table 4.2

Participant Success Self-Evaluation

Pseudonym	Pre	Current	Future	Comments
George*	-	-	-	“The past three years have actually been the happiest years of my life.”
Gabriel	-	6	9	“I’m no longer the person that sits in the corner. I was dormant.”
Sherry	3	7	10	“The Open Table helped me focus.”
Samantha	1	5	10	“Didn’t think so. Wasn’t good. Only goal was to get a job.”
Gary	4 or 5	7	10	“More positive person. Have goals to achieve.”
Graham	-	< 5	5	(Removed from study)
Sofia	Low 5	High 5	9	“A different level of 5 (pre/current). But now more hopeful. Have direction now.”
Sarah	1	7 or 8	10	“I’m way ahead than where I was when I started. It seems so unrealistic, and I forget how far I came out of where I was.”
Serenity	2	8	10	“Everything that I’m doing now is the opposite of that was me two years ago, easily.”
Scarlett	0	5	10	“Was just breathing. Had lost everything. Outlook changed to hope.”
Savannah	5	7	10	“Was overwhelmed and confused about achieving goals. No one to help me solve a crisis.”
Stella*	-	-	-	“Got DUI while on the table, so hard to see now.”
Sierra*	-	-	-	“Best place in my life that I’ve been in my 38 years.”
Griffin*	-	-	-	Not a big change. “Gave me some different views of how to go about certain things.”
Gavin	5 or 6	10	10	“I know now that God’s got me. I know everything is going to be alright.”
Grayson	2	5	10	“My wife and I were two lost souls, and we are able to see the potential in each other. I wanted to give up, but my wife and Open Table were there to push me forward.”
Sadie	8	5	10	Not working now. But hopeful and more positive.
Giovanni*	-	-	-	Problems with work and attitude before. Doesn’t know how successful he’ll be. “I’m 63.”

*Did not provide a numerical score.

The mission leaders are table administrators. They also coordinate logistics and establish the table through their churches, organizations, government entities, or with members of society. They ensure the table members are committed, capable, and motivated to help participants exit poverty while refraining from being judgmental of the individual. Mission leaders also determine the population they reach. In one area, one of the mission leaders targeted participants who aged out of foster care. In general, they select participants who are impoverished and who show a willingness to change. In order to assess the participant, they administer a Readiness to Change survey.

Each person applying to participate in the Open Table is required to take the Readiness to Change Survey in order to determine if she or he is ready. The Open Table administrators use the Prochaska's Stages of Change categories of *Precontemplation*, *Contemplation*, *Preparation* and *Action*. According to Prochaska, each stage represents a person's ability during a period of time to accomplish tasks that are assumed to be unchanging (Prochaska & Norcross, 2001).

Precontemplation

According to Prochaska and Norcross, individuals who assess as Precontemplation display no intention to change or modify their behavior and may be unaware of their issues. People close to them, such as family, friends, and neighbors, would often see the issues with the individual. If the individual participates in any therapy, it is because of undue pressure from others (Prochaska & Norcross, 2001).

Contemplation

In this stage, an individual is aware that issues exist and wants to fix them but has not committed to take any action in that direction (Prochaska & Norcross, 2001).

Preparation

The individual has the intention to change. They desire to act within a month and had tried, albeit unsuccessfully, to change in the previous year (Prochaska & Norcross, 2001).

Action

In this phase, individuals modify their behavior through experience and changes in their environment (Prochaska & Norcross, 2001). Action stage requires the most commitment of time and energy.

To be selected for the program, a person must score in the Preparation or Action categories. The Open Table administration and mission leader determine that candidates who assess as Precontemplation or Contemplation are not ready for the Open Table. Contrary to program guidelines, Graham was not administered the survey and entered the program on the word of a family friend who wanted to see him change. During a conversation with a mission leader, the mission leader brought up Graham without realizing the researcher knew of Graham or had already interviewed him. The mission leader stated that there were indicators suggesting ongoing behavioral and mental health challenges that limited Graham's ability to participate in the Open Table, but he also thought Graham did well and has become successful. Graham had not taken the Readiness to Change survey and was making inappropriate requests to the researcher. Due to these reasons, Graham was considered an unreliable participant and is excluded from this study.

After assessing the individual's readiness to change, table administrators or mission leaders introduce that individual to six to nine mentors with whom they will meet once a week for one year. Individuals selected for the study had participated in the yearlong program meeting weekly with committed table members to develop strategies and chart progress. A table is the terminology of the group dynamics. It is along the lines of a boardroom table that meets weekly

to meet objectives. The meetings last a few hours, and during that time, the participant relies on table peers and mentors to help them identify solutions, acquire resources, and to hold them accountable as they journey to exit poverty and achieve goals they otherwise thought unattainable.

The table members hold each other accountable. The participant holds their peer mentors accountable to focus on her objectives and not their own, while the table mentors hold the participant accountable to achieve the goals that she had set for herself. The table rules require the mentors to refrain from judgment of the participant. Instead, they are always encouraging, and they call the participant a “brother” or “sister” to prevent the participant from feeling like a client in a program.

Griffin was the other participant who did not believe he benefited from Open Table. Griffin did not grow up poor and had an exhaustive SC system already in place. Both of his parents were college graduates and members of his extended family are always there for each other. Although Griffin did not perceive he benefited from the program, his answers demonstrate the importance of SC and relational assets. Griffin is a reliable participant and his results are included in this study.

All interviews were recorded by the researcher with an iPhone or through an online meeting platform. The researcher sent the recording to an online site (rev.com) for transcribing. Transcripts were sent to the participants for their review for accuracy. All participants were grateful and made no changes.

Program Impact

The Open Table had a clear delineation of pre and post program effects. The study participants commented upon their lives prior to their participation on the Table and the improvement of their outlooks afterwards (see Table 4.3). The researcher did not pursue any

information regarding their current income or savings levels and could not determine if they were successful in exiting generational poverty defined by the Official Poverty Measurement (OPM) 2016 threshold of \$24,339 (IRM, 2020). OPM does not vary geographically. The Census Bureau cautions the measurement as it is not a complete accounting of how much income people need to live (IRM, 2020). However, each of the participants was geographically dispersed and presented an outlook that they either exited poverty, or they were hopeful they were on a trajectory to do so in the future.

As shown in Table 4.3, participants in the Open Table program were significantly impacted for the better. The effectiveness of the Table members was evident in the development of *bridging* and *bonding* SC for the participants. Bridging SC provides an individual the ability to utilize his or her network and identify external sources to obtain resources to fill gaps (Smith, 2006). Bonding SC builds upon their network and additionally transfers social trust among its members. They have a strong mutual support and are characterized by high levels of participation to produce change in an individual (Onyx & Bullen, 2000). Putnam characterizes bonding social capital as exclusive, inward looking, and creating strong in-group loyalty (Putnam, 2000). The study participants communicated abilities to find and acquire resources, and to develop mutual support within each of their tables to produce a positive change in their outlook.

Table 4.3
Program Impact

Study Participant	Before Open Table	After Open Table
George	Couldn't keep steady employment.	Steady job and home. Taking college classes.
Gabriel	"I lacked direction." "Felt like Satan had his foot on my neck." "Depressed. Didn't want to go out of the house." "Cheerful and jolly as a child but lost it"	"I realized I had gifts and talents." "I went up 3-notches." "People see me in a different light." "I am an approachable person." "Change was inside-out, not outside-in."

Gary	"Didn't think about problems. Didn't know what to do, so just left them."	"I'm more stable with work and finances."
Sherry	Family involved in a civil war (African country). Many close family members died because of war or poverty.	"I finished phlebotomy training. I am a medical interpreter. I can drive. I can speak English. And I can manage money."
Samantha	"Family wasn't much help."	"Table taught me how to survive." "I can call them when I need help." "They helped a lot." "My Table helped me do more with my goals."
Sofia	"I had PTSD, anxiety, depression, and no counseling."	"I am stable and have a stable job." "I looked harder for jobs." "More disciplined."
Sarah	Kicked out of foster care and was homeless youth. "Depression, anxiety, suicidal, anger."	"Taught me how to prepare for interviews." "I am much more independent." "They gave me the tools to do it myself."
Serenity	"Was impulsive." "Reaching out was difficult. Unless the situation was dire."	"I have a bank account with 3 parts: debit, rent, and savings. I budget weekly. My Table taught me the skills to do that." "Staying clean." "Learned how to break apart a crisis into smaller pieces so it is not overwhelming."
Scarlett	"In survival mode. Not moving forward. No goals." "Feel sorry for the incarcerated. They don't get a chance." "Not many resources available out of jail."	"If it wasn't for [Table], I would be lost."
Savannah	Bad credit and loans over 30% APR. "Costs were overwhelming. Filing fees, bills."	Debt free. Use credit cards wisely. Helps teach financial principles to others.
Sierra	Multiple rapes. "Scatterbrained, fended for myself. I blocked everyone out."	"My Table helped me solve problems." "Taught how to network with people to solve issues." "Help me grow. Mature."
Gavin	"I was uncertain. Scared." "I knew I had it in me, but I couldn't see where I want to go."	"My Table helped me learn and discover those steps." "I will attain my goals. If not, God has something bigger and better." "I'm more confident."
Grayson	"I was depressed and constantly question if I should be alive." "I didn't feel worthy of anyone else's help."	"We are prepared for everything that comes our way." "I hold my head up high."

Sherry's Table used their abilities to find her a scholarship to attend college. This is an example of *bridging* SC. Serenity's Table introduced her to a local artist who is famous. He took well to Serenity and now mentors her to do art. This is an example of *bonding* SC.

Emergent Themes

The research questions were to discover the reasons why participants thought they had exited poverty and were heading in the right direction for maintenance of success. The researcher established 21 foundational questions to encourage the participant to talk about their experiences (see Appendix B). Each question required participants to consider their perception of themselves and their successes. The goal of the analysis was to find commonalities between participants and to identify themes of how the Open Table experience contributed to their successes.

Using the Constant Comparative Method described earlier, five codified themes emerged from the research. The five themes are voice, collaboration, trust, hope, and risk. Each of these themes was present prior to their experiences with the Table. However, it was the intentionality of the Table that contributed to participants' perceptions that they were able to create positive change in their voice, collaboration, trust, hope, and risk, and see improvement in their lives. The research suggests that participants' perceptions changed and improved because of the synergy between these five themes. Together the themes that emerged create conditions that enabled participants to grow and change as individuals. For the purposes of this research, each theme embodied by the participants built upon the others and became a causal mechanism for improving the lives of the people in the program.

Emergent Theme: Developing Voice (V) for positive outcomes. How important is it for those in poverty to be able to develop a positive voice?

"My foster mother told me, 'Why try? You will either be a drug addict, die, homeless, or become a prostitute.'" Sarah

Overview

For the purposes of this study, the researcher defines voice as an individual's instrument of expression and the ability to communicate wish, choice, or opinion openly or formally

(Merriam-Webster, 2020). Additionally, participants used their voice to communicate their needs and find solutions. The most difficult part of this research was listening to the reoccurring struggles as each participant shared them. The six who aged out of foster care all had similar stories of abuse, instability, and system challenges. They shared accounts of how courts, doctors, agencies, and foster care providers were apathetic to their needs. As they attempted to navigate the system in their youth, they admitted that they were naïve and ill prepared for the rapid changes. They shared experiences with education that was sporadic and difficult to navigate with success. Gary and Grayson attended half a dozen high schools. They and several other participants suffered from being in a cycle of homelessness, and Grayson lived under a bridge for two years. It was difficult for Gary to provide proof of residence and he knew that he could be expelled at any time. Sofia and Sarah rotated among foster homes and each time had to enroll in a new high school. They lost momentum each time.

As these participants who eventually aged out of foster care reached their adolescent years, they drew inward and challenged the system. One foster parent told Sarah that all kids in foster care like her will either become a drug addict, die, become homeless or a prostitute. Participants shared that these types of comments were powerful discouragements to them and removed hope. They did not know how to speak up for themselves. Sarah for example, felt she had no voice at all in the matter. Like the others, she discussed that the lower they fell down on the socioeconomic scale, the more their voice was dismissed, and the higher up a person climbs on the socioeconomic scale, the more that person's voice is listened to by others. Because they felt they were on the bottom of life's scale, they felt that their voice was considered unintelligent, unproductive, uneducated, or insignificant.

Of the 17 participants, Griffin did not have this challenge; however, the remaining 16 did. Griffin struggled in college, but he rebounded quickly after taking a gap year and seeking

guidance from the SC network he already had within his family. Seven (41.1%) of the participants grew up in very dysfunctional families from birth. They felt other individuals would not listen to their voice, and they subsequently became depressed, suicidal, and filled with anxiety. Several participants described their inadequacies to communicate their needs. They felt helpless, as their voice was lost in the chaos. They shared that they began using drugs and alcohol and became addicted. When the researcher asked how they dealt with problems before they participated in the Open Table, they mentioned using drugs to escape from their troubles, or they simply ignored their problems. One person said he attempted suicide many times, and two of these attempts were almost fatal.

Because of the lack of their voice communicating their needs, the study participants shared that it was difficult to find resources or support especially as they became adults. They shared it became a perpetual cycle from not being able to voice their concerns which exacerbated their inability to obtain services, which further diminished their ability to speak out for their needs. Grayson shared that most agencies offered limited support, or it was too complicated to obtain services such as unemployment compensation, job coaching, or stipends. The participants who aged out of foster care shared that their case managers never shared with them the many services that they were entitled to receive. Grayson said that the system to provide resources like vocational training was overpopulated which made it difficult to get the ball rolling. Serenity said she tried repeatedly to get aid to pay rent or utility bills, but the process was very difficult and the results were not worth the effort. All but three participants said that they did not have reliable transportation. Participants became homeless after rotating living arrangements with extended family, friends, or at a shelter. Large debt was a common factor among the participants, or they could not establish credit. Gary applied for several credit cards and confessed he had no concept

of how credit cards worked. He amassed over \$40,000 in debt. Participants admitted that they ignored their responsibilities and did not pay their bills. Five (29.4%) became felons.

Repeatedly, the researcher heard that no one cared for them. Sofia shared a common theme among the participants that people often said they cared for them, but in six months those individuals would disappear. In other cases, the participants exhausted eligibility in services. Support from churches or agencies dried-up, and evictions were enforced. Often the participants shared stories that they had no way to fix it and no one would listen if they could. They felt voiceless.

Study participants communicated that they lacked confidence. They felt that a lack of confidence directly correlated to their inability to exit poverty. Confidence to speak their needs could generate support. They shared that they tried just to survive and were not able to rely on the complicated system or anyone within it (Table 4.4). Some fought to become as independent as possible. However, they shared that their independence was without structure or guidance. Participants said their pursuit for independence was counterproductive and reckless and led to instability. They fought against systems or gave up as the processes were complicated and too difficult to negotiate.

Participants stated that because they had no one to listen to them and therefore, nowhere to go, they became depressed or anxious. They perceived themselves in awful circumstances and developed mental health issues or pursued drugs or alcohol to the point of addiction. Only Sherry and Griffin stated they did not have depression, anxiety, or addiction. 100% of the participants who aged out of foster care and five others shared that they were abused physically and/or sexually. All 15 of the study participants who shared that they had depression, anxiety, addiction, or PTSD stated that they had a significant trauma in their lives. Except for Sherry and Griffin, all of the participants sought medication for mental health issues or became dependent on drugs or

alcohol as an escape to run from their problems. They said they were powerless and had no voice to call out to someone for help. Stella shared a common theme among the participants in that difficult situations led to finding someone within your circle of friends to help you out, or to find a vice to remove worries. Individuals within their circle of friends were usually in the same circumstances or would take advantage of the participant when they were weak or insecure. Seven participants turned to drugs and alcohol. Five participants moved far away from their homes thinking that would be a solution. Sofia turned to her other foster brothers and sisters; however, they were ill equipped to help her solve her problems. She said that her cries were lost in the noise.

Gary attended several high schools. He was homeless and wanted to get into a high school near where he was staying. In order to get into school, Gary was required to show proof of residence. He knocked on many doors to find someone who would let him borrow a water bill or electric bill or a receipt to show an address to prove he lived in the area.

Sierra said she felt scatterbrained and had to fend for herself. While growing up, she was raped repeatedly by family members. She had nowhere to go when things were difficult. She learned to “block everyone out,” and if she needed somebody, she thought it meant she was weak.

Gabriel and Grayson said their independence was reckless and devoid of purpose. They lacked direction and had no plans in life. All participants except Griffin stated they had no specific or well thought out goals prior to their Table, and Serenity stated her only goal was to keep her head afloat. Participants believed they lacked confidence because they had no effective independence. They had to rely on their own abilities to provide for themselves in order to survive, but they were unsuccessful. They learned to stop crying out for help.

Table 4.4

Voice

Study Participant	Confidence Before Open Table	Confidence After Open Table
George	"My original plan when I got out of prison was as soon as I got some relative freedom without supervision, I was going to kill myself."	"I became rigidly honest with myself." "I am thriving." Major improvement with his depression.
Gabriel	"I was in a corner not making a lot of noise." "Was extremely shy." Quit job.	"Voice to self is a lot different." "Taught me to be bold in my conversation." "Taught me to really take advantage of all the connections around me."
Sherry	Was a refugee and did not speak English. She did not see her success becoming a 7, 8, 9, or 10.	Pre-Med program studying to become an OB-GYN. "I have become strong, confident." "I was taught how to ask for help."
Sarah	"I wrote about suicide and was institutionalized." "I felt rejected, worthless." "Sent to other foster homes, made it worse."	"They were just there for me and still are." "When I graduate nursing school, I will invite everyone one who gave up on me."
Sofia	"Didn't know any of the resources available." "No one else can advocate for you."	"My Table helped me change and gave me more of a voice."
Samantha	Failed at work and school. Terrified of driving. "Banks cater to those who make more."	"I feel more confident."
Serenity	"I ignored my problems and hoped they would go away." "Couldn't handle the consequences before." "I would talk to my foster family as a last resort."	"I learned compassion." "I'm more stable." "I quit drugs as an escape." "No anxiety about facing challenges now." "The Table is about getting you to a better place." "I work harder."
Scarlett	"World wouldn't give me a chance to redeem myself." "I was paranoid. I couldn't get out of my problems. I was overwhelmed and depressed. Scared." "to death." "Goal was to just live. Focused on the day."	"They asked me what I want to focus on." "They helped me with my court appearances." She was sued by an individual and her Table also helped her find representation.
Sierra	"Couldn't make ends meet." 7 children. Endless worry. Scared.	"Let things go. I am at the most peace in my life."
Savannah	"I grew up homeless and in foster care. Mom committed suicide." "Miserable dealing with issues."	"My Table was fun. They got to know me and my kids." "My husband and I communicate better."
Gavin	"Running from consequences." "I would always return to that lifestyle." "Reacted to crisis with anger." "I stopped talking."	"Gave up a lot of my own ways." "I learned how to talk it out."

Grayson	Both he and wife Savannah came from bad backgrounds. “I regret not pulling my head out faster.” “I would freak out, sell drugs and get loans.”	“We are great together (wife) when we keep goals and reach it.” “Paid all of our fines and two judgments vacated.”
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All participants came to the point that they were screaming without noise and they felt like no one cared to listen to them. They became silent and withdrawn, trusting others very little or not at all. Stella and Sarah both pursued relationships as their vehicle out of their circumstances. However, their significant others were either gang members, heroin addicts, or dealers and could not help them break the cycle of despair.

On the first week of the Open Table, participants “break bread” with the table members. Participants are called “brothers” or “sisters” and they listen to their table members talk about themselves and their commitment to meet together for one year. The second week is designed for the participant to tell their story in an area free from judgment and to set goals to achieve during their year together. Every participant told the researcher that they felt the table members were genuinely listening to them in a safe zone. It felt nice. Samantha never felt like anyone listened to her before. She thinks she discovered her voice with her table members. She said, “Before [the Open Table] I wasn't really exactly sure who I was.” During the interview, Samantha was timid and said she has a lot of anxiety. She would never have participated, but she now has confidence to share her experiences.

Many of the participants had outstanding warrants, fines for violation of parole, or, in one participant’s situation, \$13,000 in traffic tickets. Their goals established on the Open Table depended upon the participants using their voices constructively. They realized their voices were heard, and it was important to use them in a productive manner. They were able to face lingering issues and look for solutions with their table members. They may not like the problem, or the projected outcome, but they shared that they felt heard and their words had consequences. Two

examples are Gavin and Grayson. They both admitted that they had to face the results of their bad choices mostly related to breaking the law. They had to contact the courts regarding their fines or crimes.

In order to regain a positive momentum or to become productive, they had to use their voices to represent themselves positively knowing they would incur consequences requiring them to own their past behaviors. Gavin, for example, had \$13,000 in traffic tickets and was ineligible to obtain a driver's license to work and earn money. The Open Table members were able to identify a provision to obtain a limited or provisional driver's license that allowed him to drive between 7am and 7pm for work purposes. Gavin had communicated his needs to the court and began paying down his fines. He obtained his provisional license and after a few years achieved 70% completion on paying his fines. Gavin's goal is within sight. He knows when he will be eligible to obtain full driving privileges and has a plan to achieve it. Prior to the Open Table, Gavin said he would have continued to run away from this overwhelming problem by unlawfully driving.

Feedback

A striking response from the participants was their ability to provide feedback to the group and receive it from the table members. They described their challenges in a system when no one would listen to them, and they compared it to their Table and how the participants gave them opportunities to share. Gabriel said that his time with his Table members allowed him to communicate more effectively, and now others see him in a different light. Participants did not feel judged for their comments at all. Table members did not have the same life experiences as the study participants, and the participants enjoyed being able to share their circumstances in order to work on goals together. A participant's feedback, and the table member's ability to listen provided the necessary foundation to chart their goals.

Table 4.5
Feedback

Study Participant	Before Open Table	After Open Table
George	Court appointed counseling did not help.	"They listened." "They helped me solve my own problems."
Gabriel	"I should have listened to God instead of doing my own thing." "Asking God, why did my dad die?"	"I could talk. They helped me out spiritually."
Sofia	"In the system and on own since 13. Go where told to go." "I wasn't approved for any resources. They didn't care and the program just gave me a big book of phone numbers."	"My Table was a support community. I could talk." "They helped me and could talk on my behalf." "Learned how to talk (communicate) with my husband."
Sarah		"They asked me what I hope to get from it."
Scarlett	"Probation Officer didn't help at all."	"Asked me what I want to focus on. My choice. My voice."
Sierra	"I felt if I needed someone, I was weak."	"I've changed. We need others!" "Mind no longer racing." "It's okay to let people help you." "Don't do everything yourself. Let someone in, or it is harder." "I had to be willing to let them help me."
Gavin		"Taught me how to have proper conversations." "Having them to talk to was monumental." "I am more well-rounded. I speak my mind positively."
Grayson	"I was scared. The kids looked at me like I was something positive and I wasn't"	"Ran into emotional feelings. Talked about it." "My wife and I communicate better." "Open Table encourages talking."

Serenity discovered after two months with her Table that they were encouraging her to be the boss of this process, and the table members were invested in her success like board members in a corporation. They were able to discuss ideas and chart goals that made sense to her. It was up to her to make this work. She said it was her ability to provide feedback with the group that made her successful. She was able to stay clean and not make impulsive decisions. Gary said that he was ignorant of the resources and assistance available before his Table, but through his work with them, he learned to be a better advocate for himself in court, during job interviews, and in communication with his wife Sofia. Gavin said that having the ability to talk to his table members was "monumental." He said he is not the same person.

Participants repeatedly stated that their table members taught them to communicate productively and effectively. Dialogue with them was enjoyable and beneficial. They developed self-confidence and learned how to listen and provide feedback.

Voice Summary

Voice is an important component in poverty alleviation. Blair (1969) stated that the voice of poverty is suppressed. She goes on to say that we must incorporate an individual in poverty into developing their path to success. However, the participants stated that prior to the Open Table, the programs they used either intentionally or unintentionally embittered them. Blair said that will reduce their voice (Blair, 1969). The Open Table clearly accounted for the participant's voice in their development and taught them to empower it to find their own solutions. Because of the Open Table experience, participants were no longer embittered, but, instead, felt emboldened. Participants learned to listen as well, and they described that they felt relevant and productive. They developed their voice to work with their Table members in a collaborative way in order to get what they needed.

Emergent Theme: Collaboration (C) between participant and Open Table Members. Does building supportive relationships help achieve goals and overcoming challenges?

Overview

For the purposes of this study, the researcher defines collaboration as the ability to work or cooperate jointly with others to achieve a common objective. Surprisingly, participants spoke more of their collaboration with their Table members than of any of the other themes. It became clear that the participants felt they lacked positive collaboration prior to their experience on the Table. Previous collaboration was superficial, or it did not exist. According to them, collaboration was effective when the participant believed their voice was heard. Voice was often paired with collaboration. Once they knew they had the ability to talk in a judgment-free area,

they were able to begin the process of working in a long-term setting with their Table members. To recap, a voiceless person goes through established protocols when receiving aid. Sierra said that she attended agency meetings because they gave gift cards, which allowed her to eat for the week. However, she did not care about the message the agency delivered, nor did she feel the agency genuinely cared about her circumstances. She explained her experience on the Table similarly to Gabriel's perception. Gabriel said that when he joined his Table, there was a "love exchange." Sierra, like Gabriel, felt heard by her Table members, and they did not judge her for her past. They allowed her the ability to share about herself, which created the conditions for her and her Table to collaborate effectively.

Grayson said that his Table mentors had the knowledge and direction, and that his wife Savannah and he had the motivation. The Table members were experienced in business and knew how to navigate the system and help Grayson and Savannah achieve the vocational training they were pursuing and acquire the knowledge of how to start their own business when they finished vocational training.

Several of the participants were reluctant to collaborate because they did not know how a team could help them. Their experiences in the past instinctively created a survival barrier to avoid getting close to others. Griffin said his Table was a group of, "old white ladies all up in your business," but he said later he realized they were a great group of people. As participants shared their stories, they learned that Table members were genuinely committed and willing to get involved to help them reach a positive outcome (Table 4.6).

When speaking about her experience with her Table, Sarah said, "They helped me develop a game plan." This experience differentiated from her experience in foster care. She stated that her foster parents, her advocates, and agencies all failed to prepare her to become an adult, and she was not able to obtain resources on her own. The Open Table members helped her

with her goal of going to college and becoming a nurse. The Table members coached her through the admissions process at the college where she attends and worked with her to achieve her goal. Their relationship grew to where she could depend on their input and trust them to follow through on what they said they would do. During this process she discovered that when she experienced a hurdle, they were there to work with her to solve it. The Table members were able to help her navigate what appeared to her to be a foreign and complex system; they realized she was eligible to get a small loan through the college for a laptop. She, like the other study participants, did not have transportation assets or funds for public transportation. Sarah's Table members rallied to help her find transportation to the college. One of the members provided transportation for her. Sarah remarked that each Table member had a successful track record in life and brought a different quality or expertise to the Table to help her in accounting, finding resources, providing emotional support, and obtaining transportation. Sarah felt it was a real community coming together to help her succeed. This theme was prevalent among all participants including Griffin whose family was his SC prior to his participation with his Table.

Table 4.6
Collaboration

Study Participant	Before Open Table	After Open Table
George		"I want greater involvement. I've got more people involved with my life." "They supported me very well after my amputation."
Gabriel	Wandered aimlessly when dad died. "I didn't want to be around a lot of people." "Felt like I just took a big punch to the gut."	"The Open Table is a brotherhood and still goes on." "Brought ice cold water in a hot dry desert." "I have grown socially."
Sherry		If she finds herself in a jam, she calls her Table and asks for prayers.
Gary	"I felt alone."	"My Table felt like family. Like they adopted me." Bad car accident and ruptured appendix. Called his Table "family". They helped.

Sofia		“They were like parents.” “My family now comes to me for help.” “We felt loved by them. Reliable. Cared for.” “Stopping the table felt like losing family. Losing community.” “Work is my new community.”
Sarah	“No family.” “Foster program didn’t prepare me.”	“They helped me develop a game plan.” Community grew to include spouses. “Found a living situation away from a drug home.” “When I was struggling in school, they paid for a tutor.” “We became family.”
Serenity	“I had one friend. Poor.”	Connect more with the art community. “We do a lot of activities together.” “I’m more social.” “We call each other and hang out.” “Feel loved.” “Helped me find employment.” “Invited me on their family vacations.” “It’s all about community.”
Scarlett		“People get a chance in community.” “Helped me with connections.” “Helped me find rent free housing.” “I depend on them a lot.” “We were lucky to participate.” “We talk to them all of the time.”
Savannah	“No one to help during a crisis.”	“They were fun and interactive. They got to know the kids.” “Helped with transportation. We wouldn’t accept financial help. We had too much Pride.”
Sierra	“No support systems.” In gangs and doing crime. She felt hopeless as a mother.	“We continue our relationship after Table closed.” “We became family halfway through the year.” “Turned to my Table when one of my children had mental health issues.”
Gavin	“No one to lead me.” “I needed healthy people in my life.” “Struggled with relationships.”	“Meeting together was huge to me.” “I have people around me to talk to.”
Grayson		“Wife and I see potential in each other.”

Gavin said that he had no one to lead him through his difficulties. He had been in and out of jail 21 times. He believed he needed healthy people in his life, but he just ran from his consequences. At the Open Table, Gavin received wise counsel on a weekly basis. This was “huge” to him because he understood he needed to grow up. He said they cared and wanted to be there for him, and they stayed through the trying times he experienced during their year together. He stated that he struggled with relationships and difficulty talking to others. They showed him

how to have proper conversations that led to successful job interviews. Gavin's Table connected beyond the professional level and bonded as a family. Gavin had not enjoyed this type of collaboration prior to his Table. When Gavin became engaged, his Table threw him an engagement party.

Sarah shared that she fought with one member of the Table constantly. She said that when she began at her Table, she was still immature and disrespectful. However, this mentor saw the worst in her and never judged her or tried to change her. She supported Sarah when everyone else in her past had given up on her. Prior to the Table, Sarah thought that something was wrong with her and she had really low self-acceptance. This Table member helped her through that emotional struggle.

Gabriel said he lacked direction, but the Table "meets you where you are at." They were not judgmental and, "brought ice cold water in a hot dry desert." They helped provide direction for him allowing him to use his own gifts and talents. He called Table members a "brotherhood." Gabriel said that his Table members shared that they were part of something good; a community that would work together.

Accountability

During the interviews, every study participant shared their goals, which they worked on with their Table (Table 4.7). Goals were unique to the individual; however, every participant shared the same goals dealing with their finances and establishing a budget. Because the interviews were in January, almost all of them referred to needing help with taxes as they were preparing for filing this year. Participants shared that previously this would have been overwhelming, but with the support and guidance of their Table members, it became doable. Similar to the other participants, Gavin shared that his Table mentors helped him learn and

discover the small steps necessary to file his taxes and to set other budgetary goals. They met weekly reviewing all of his objectives and tracked progress. Filing taxes was overwhelming to him before the Table, but with his Table members working through the steps with him, he was able to keep on track. Scarlett said she depended on them a lot to keep her on track and still does after the Table ended. They helped her identify her path and continue to encourage her to stay on course.

Table 4.7
Accountability

Study Participant	Before Open Table	After Open Table
Gabriel	“Class clown.” “I didn’t listen.” Didn’t have goals; on a “mental vacation.”	“They helped give me direction.” “I connect often with my Table to readjust goals and keep focused.” “The Table was just really, man, supernatural and came at a good time. The Lord worked through them to change my life.”
Samantha	“I get sidetracked easily.”	“Kept me focused.”
Sofia		“Taught me how to handle life things.” “Helped me with getting a lawyer after the car accident.”
Sarah		“Taught me how to make specific goals and take little steps.” “I can call them anytime.” “I contact them to get their perspective. To get my thoughts together.”
Serenity		“The Table became proud of me, and I didn’t expect it.” “My Table helped me help a friend in trouble.” “It’s my adult support group.” “They call to see if I’m doing okay.”
Scarlett		“Helped me get a job.” (Multiple felonies) “Expectations of me are insane.”
Savannah	Had goals, but not structured. Had too many hurdles. “No direct path.”	Table “lit fire under my butt.” “Made my focus better.” “Goals went quicker as a team.” Goals: budget, improve credit to high 700s, helped get two judgments vacated. “They helped keep us from getting into problems.” “Better choices for our inner circle.” “The Table provided accountability and community for success. They were a sounding board, and they were proud [of us].”
Sierra	Blew off the Table and then tried it.	“The table became proud of me and I didn’t expect it. For a foster kid to hear it, is real

		nice.” “Worked collectively as a group. Scattered out chores, got connected, networked.”
Gavin		“They were wise council.” “They cared and wanted to be there.” “They stayed with me through a lot of trying times.”
Grayson		“Our Table gave us strategies to overcome. Milestones.” “Say what is happening. Agree on those steps. Make those steps.” “At home, we have a calendar and budget board.”

Savannah said that her goals were accomplished quicker with a team. They helped her navigate the court system and find a lawyer that she could afford. She refused any financial help and worked closely with her Table to maintain her focus on her goals. She participated in the Open Table with her husband Grayson. They both had long-standing court issues and felonies. By working together with their Table mentors, they were able to have two judgments vacated, other charges dropped, and fines reduced or annulled. Savannah said her team became like family to her, Grayson, and their children. Their routine meetings helped Savannah and Grayson identify issues early and keep them from becoming bigger problems. She recalled the Table’s accountability for reviewing their individual and collective goals with her husband Grayson, for acknowledging the milestones they achieved, and for adjusting the strategies to continue progressing. She attributes their success to this community. She said her Table members are a sounding board, and they are proud of her accomplishments.

“The table became proud of me and I didn’t expect it. For a foster kid to hear it, is real nice.” Serenity

Serenity had an interesting example when a Table member helped keep a clinician accountable. She said that one of her Table members was concerned about her health, so Serenity asked her to go with her to a medical screening. She said that the Table member helped her better communicate with her doctor where she was unable to previously. The Table member who went

with her realized that the doctor was treating her less than favorably. Because her visits usually went like this one did, Serenity was unaware of the negative way her doctor was treating her. Serenity believes the Table member kept the doctor accountable and now Serenity has the communication skills necessary to speak for herself and keep her doctor accountable for her own improved health. She says the Table is her “adult support group.” Serenity’s Table mentors taught her to budget weekly and worked with her each week to improve. She now has a bank account and has learned how to divide her money into three categories: rent, spending, and savings.

Gary had a significant health issue. He was in a car accident during his time with his Table. As soon as he recovered, his appendix burst. His Table members were there for him and Gary said, “I don’t feel alone.” They checked up on him outside of the Table meetings ensuring he had everything he needed. Gary is married to Sofia and they have several children. He said the Table members felt like family. They were accountable to each other.

Sierra felt hopeless as a mother with her seven children. She said one of her children is having significant mental health issues and her Table members continue to provide emotional support by helping her through this issue. While talking with Sierra, a Caucasian woman came into our area during the interview. Cognizant of the time, the woman asked if she could pick up Sierra’s children and take them to their dance lesson appointments. They talked like family who can rely on each other. After they agreed on time, dinner, and other informal discussion points, the woman left. Sierra disclosed that woman was a member of her Table. Her formal Table meeting had ended three years previously. She said, “They have invested so much in me, if I didn’t finish, it is a slap in the face to them.”

Collaboration Summary

When the researcher asked the study participants about their table and how many were on their Table, all but one of the study participants listed the names as they counted them. All the

study participants continue to talk to some or all of their Table members. Their collaboration proved beneficial and progressive to achieve their goals. It is the transition from Collaboration to Trust that shows the social capital transition from *bridging* to *bonding* social capital. Their Table became family when the participants began to work together with and trust their Table members.

Emergent Theme: Trust (T) as a result of developing a relationship with Table members.

Does cultivating trust and social capital improve someone's ability to make positive outcomes?

Overview

Trust is the ability to place confidence in someone or something. It forms a dependable foundation for future events. Additionally, trust is also the duty imposed in faith or confidence as a condition of some relationship (Merriam-Webster, 2020). For the purposes of this study, Trust is defined as the ability of the participant to place confidence in another with whom they have a relationship to perform their duties. The ability of the participant to establish trust became contingent on their voice and collaboration. After developing a positive voice and collaborative relationship with Open Table members, study participants began to develop trust. Based on the responses to the interview questions, voice and collaboration were necessary precursors to trust (Table 4.8). Many participants shared that prior to their Tables, they had struggled to develop trusting relationships. Scarlett said she could not trust her probation officer (PO), who did not help her at all. Stella said that her PO only wanted to “violate” her for probation infractions. Gavin said he stopped talking to people (voice) because he could not trust them. He stated he struggled with relationships (collaboration) and needed healthy people in his life (collaboration and trust). Six of the participants aged out of foster-care and all six had very negative stories about their experiences (voice, collaboration, and trust).

Sofia said that she had a lot of faith in God originally. However, she saw a lot of bad things happen in foster care and came to the point where she lost faith in God and could not trust people. She was trying to get to counseling because her trauma caused PTSD, anxiety, and depression. During this time, she was placed on a youth foster advocacy board called Fostering Advocates for [State] which was comprised of teenagers in foster care and two adults. Most of the other teenagers on the advisory board were in situations like hers. The teenagers really could not help each other, and she said the two adults were not helpful either. She lost the little trust she had remaining and felt hopeless. However, the Open Table taught her to trust people again, especially adults. She said her Table members were like parents to her and provided positive role models. “We [Gary, her children, and her] felt loved by them. Reliable. Cared for.” They helped her change. She continues to reach out to them for advice and as a sounding board.

Transparency

“Takes strength to be transparent and let people in.” Sierra

The study participants shared that their biggest challenge was becoming transparent to the Table members. They mentioned that trust was built because of the Table members’ willingness to be transparent. According to the participants, the first day they met with their Table was called *Day One: Breaking Bread* (See Appendix E). Every Table member opened up to the study participant and shared their backgrounds and experiences. They shared how they thought they could contribute to this process and let the participant know they would call the participant “brother” or “sister” to establish a familial environment. Table members shared their social capital in order to be receptive to their participants. The Table members were showing they would be transparent, laying the foundation for the study participant to be as transparent with them. The Table members had set the example for transparency at the first meeting and continued that transparency throughout their relationship.

Sofia said that it was difficult for her to be transparent on that first day. She said she was scared because, “getting involved with somebody that doesn’t know much about you and then just pouring yourself, your whole life into those few people that are willing to be there for you, and it is a lot because I just don’t want them to leave in six months and then you have to start all over again.”

Table 4.8

Trust

Study Participant	Before Open Table	After Open Table
George	Had to hide his past.	Learned to open up and trust others.
Gabriel		Table helped a lot when mother and sister were in a horrible accident. One of the Table mentors hired him to help him get out of debt. “They pledged a year of their life to bettering me!” “I never saw it coming.” “If I call them, I know they already got me. It is a good love exchange.”
Sofia	“Lost faith.” “Saw bad things in foster care.” “Day 1 of the Table, I was scared.” “I don’t want them to leave in six months.”	“Regained faith.” “I would tell my younger self to open up and trust people.” “A lot happened within that year.” “I need to learn to trust adults.”
Sarah	“Breaking bread – shared their story.” Scared and did not want to hug. When they tried, she said, “No, don’t touch me.”	“Now we talk about everything.” Now she hugs them all of the time they see each other. “They helped me cover rent and food.”
Serenity	Upon meeting her Table, “I was scared at first.” “Didn’t connect with them for two months.”	“We need to bring in others into our community and expand it.”
Scarlett	“I was pessimistic, overwhelmed. I stopped talking.”	“I didn’t prepare myself that the Table would help me as much as they did.” “They were so compassionate. Each helped in a different way.” “Table built a trust environment.”
Sierra	“First meeting called ‘Breaking Bread’. They told all about themselves. The second meeting I told them my story.”	“It takes strength to be transparent and let people in.” “Had similar stories but different backgrounds.” “It’s okay to let people help you.” “We know each other and our insecurities.” “Table members need to want to help.”
Gavin		“You have to let other people in.” “Surrender to something bigger than myself.”
Grayson		“We were hungry and motivated. They had the knowledge. They were there if we needed

		them. We obtained the knowledge, and still do. They taught us.”
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Serenity said it took two months to trust her Table members and a major crisis for her to realize that they were the only ones she could count on to help her resolve her issue. Grayson and Savannah were transparent immediately. They knew the only way to succeed was to trust them and open up and communicate (voice and collaboration) immediately. Although Gavin was scared at first, he knew being transparent was necessary. He had a lot of reasons why he thought they would not accept him, but he placed it all out there for them to hear. Stella said she trusted her Table members, but then she confessed she had a DUI while on the Table and took a month to finally tell them. Nearly all of the study participants responded to the research question of “What advice would you give to a younger version of yourself?” by saying that they should trust their Table and open up to them sooner rather than later.

Gabriel’s mother and sister were in their car and were broadsided by a drunk driver. They were badly injured. Gabriel admits that he was “shell-shocked and angry.” He also admitted to being overwhelmed, but his Table came alongside him, and worked with him to get through this catastrophe. They helped him emotionally and financially.

Sarah was so traumatized through her foster care experiences that the first session of “Breaking Bread” with the Open Table was extremely difficult. She said that the Table members were “huggers” and Sarah had significant issues with being touched. However, Sarah grew to trust her Table members after she could share her insecurities (voice). Because of the growth in their relationship, Sarah is now initiating hugs and kisses with her Table members. Transparency allowed Sarah’s Table to grow and include Table member spouses. Sarah feels like they are honest and genuine with each other, which allows for much better outcomes. They became family.

Gavin said he knew he had to let healthy people into his life and the Table members provided wisdom for him. Scarlett stated that if it were not for her Table, she would be lost. She acknowledged that her Table helped her to recognize a trusting environment with them. Now she says, “I depend on them a lot.” Within the first two months of her Table experience, Serenity was still skeptical. She accidentally threw away her wallet and panicked because she lost everything - money, identification, and personal information. She did not know who to call, so she called a member of her Table and they convened to help her through this issue. She pleaded for help. They all responded, and that was when she realized she could trust them. It was after the wallet incident that she also realized the potential for growth through trust. She said she felt loved. Sierra shared that everyone helped each other, “...and that's where we started building like crazy relationship, because you start realizing like some of your own insecurities as well as those of others and like trying to help each other through those things. It was a pretty cool experience, honestly. Like we've still been there for each other, if somebody passes away or if there's just something going on and they actually share it with us, and we know that it's going on.”

Non-Judgmental (Table 4.9)

Grayson is heavily tattooed. He was homeless under a bridge for two years and had multiple felonies. He knew through his experience that many people would see his tattoos and jump to incorrect conclusions about his demeanor. Although he admitted to being violent as an adolescent, he had had a significant change of heart. His fear about joining the Table was that the Table members would judge him for his appearance and not want to help. Grayson said that he felt like it took some time for the Table members to be comfortable around him, but they expanded their comfort zone and accepted him and his wife regardless of their appearance. He said that trust grew both ways. Grayson considers himself emotional, yet they were able to talk about his insecurities in his Table. He learned from them how to talk to his wife Savannah. He

further said that now as a couple, they are great together and can set and reach their goals of moving out of state, starting a business, opening a ranch, and becoming foster parents. He said that life is full of mishaps, and when a mishap occurred, the Table members did not rush to judgment. Instead, they kept their trust and moved forward. Grayson mentioned that Savannah and he can now see the full potential in each other because of their experience with their Table.

Table 4.9

Non-judgmental

Study Participant	Before Open Table	After Open Table
George	Registered sex offender.	"My table knew all about my crimes and still wanted to help me."
Gabriel		"Met you right where you at." "Nothing that they do is judgmental."
Gary		"They saw me."
Sarah	"I had a rap sheet, kicked out of foster care, homeless, and relied on churches for food and shelter. It was weird. I didn't know them (Table)." "Everyone else gives up on you. It gives you the mentality that something is wrong with you. Low self-acceptance." "Foster parent told me I would be a drug addict, dead, homeless, or a prostitute."	"I fought with them and was disrespectful. [She] has seen the worse in me. Never judged, good or bad. She never tried to change me. She supported me."
Serenity	"Doctors acted differently to me than to others."	"Took a Table member with me. Was surprised how the doctors reacted to me. Helped me communicate with my doctor better." "Doesn't matter what my bank account looks like, I have support. I'm good."
Savannah		Both husband and she are heavily tattooed. "Changed our Table members' outlook on physical appearances." "We made different types of friends."
Sierra	"Uncontrollable at beginning. Didn't know these people."	"Learned to confide in them. They didn't judge me. Became family." "They didn't talk behind my back."
Grayson		"Grew in comfort and trust." "Had to swallow my pride to do the Table, now we help each other."

Sierra said she did not think there were any good people left. At the beginning of the Open Table, she, “did not know these people.” However, they did not judge her, and because of that, she was able to confide in them. They became family and did not talk about her behind her back. She learned that needing someone now is not a sign of weakness anymore. She said that they know each other and each other’s insecurities. “I had to be willing to let them help me, and the Table members need to want to help.”

Gary said he felt like he was adopted, and they saw him for who he was. George felt his felonies would be a barrier for them to work with him, but they were not. Stella said they learned to love her for who she was.

Trust Summary

Expanding upon voice, Table members provide collaboration for continued growth and setting goals. The study participants were able to develop trusting relationships with their Table members because of the natural progression of voice to collaboration to trust. The progression continues when a person believes they are listened to (voice), that they have a team with which to succeed (collaboration), with whom they can be transparent (trust), and subsequently, they can look at their circumstances with hope.

Emergent Theme: Hope (H) as a consequence of voice, collaboration and trust.

Do participants cultivate a perspective of Hope (H)?

“Best place in my life that I’ve been in my 38 years.” Sierra

“This has been the best three years of my life.” George (69 years old)

Overview

Through the Table, the participants developed a positive voice to produce outcomes for their needs. This positive voice led to a constructive collaboration which, in turn, evolved into trusting relationships. When all three are encouraging and helpful, study participants can now

envision themselves accomplishing things they once thought unattainable (Table 4.10). Sierra said she now has life without chaos, and she never knew what peace felt like before. Listen to her own words as she describes discovering peace.

“I can say that I'm at the best place in my life that I have ever been in my 38 years. I've learned like letting things go, not allowing so many things to worry me. This is the most peace that I've had in my life in ever, in forever. I told them that it was so peaceful that I was actually scared of it. So, one day I was driving [in hometown] and I was crying. I'm just driving home and all of a sudden, I just started crying. I realized it was a gospel station on the radio, but I just started crying, and I called somebody and I'm like, I'm calling [an Open Table mentor]. And I called this lady there that I know, and I was like, '[...], thank you, you answered your phone.' She's like, 'What's wrong, sweetie?' I was like, 'I don't know.' I was like, 'I just started crying out of nowhere.'”

“I said, 'I was sitting here driving and I realized my life is usually in shambles. Like there's always so much chaos in my life, whether it be my own or my kids or me alone, other people to dump their crap on me, my life is always in chaos and my mind is always racing and dealing with, trying to deal with so much, that I realized that I had absolutely nothing going on, and that my mind was no longer racing, and I had nothing to think about to drive me insane,' and I got so scared. I was like, 'I don't know what the Lord is doing right now,' I said, 'but this has got to be the loneliest place ever. I don't know what to do with not having something to do. I never knew what peace felt like.' And she was like, '[Sierra], that's peace.' And I'm just like, 'I don't like it.' I was like, 'Why would he bring me all the way to this point where everything is all calm just to leave me?' She was like, '[Sierra], he didn't leave you, calm down. This is peace.' And I was like, 'I don't understand it. This is foreign to me. I don't know what this is, and I don't know how to deal with it.'”

“She's like, '[Sierra], just chill out.' The whole 20 minutes it took me to get home, she kept me on the phone, and she calmed me down until I stopped crying. And I think I sat down the next day in the house, no noise, no kids or anything around, and just kind of sat around like, what is going on here? And I was like, I actually like this focus, like this place of peace where everything is calm and I don't have anything going on, I like this place, and I kind of want to stay here.”

Perspective

The study participants stated that their Table taught them not to be overwhelmed with life issues and taught them how they can segment their issues or problems into smaller steps. Their Tables taught them to organize their solutions, to set goals, and to achieve them, which contributed to their outlook of hope. Gabriel is a student at a local community college. He said that he can hope now. He has a structured path to get out of debt where previously it, “felt like

Satan had his foot on my neck.” “The Open Table set my feet on solid ground, and that is not the end of the story.” He is now “goal-oriented” in pursuing his education and future marriage. He said that, “People see me in a different light.” That statement applies to his newly developed voice as well. He is more self-confident, and his new organizational abilities make it possible for him to pursue other dreams.

Table 4.10

Hope

Study Participant	Before Open Table	After Open Table
Gabriel	“I was dormant.”	“Now I am goal-oriented.” “The Lord set my feet on solid ground, and that’s not the end of my story.” “I know where I am going.”
Sherry	Her success measurement was 3.	She is applying to University of Arizona to pursue pre-med.
Samantha		“Happiest I have ever been.” “I discovered more about myself.” “Focus on one thing at a time.”
Gary	“I was ignorant. Didn’t see myself being successful.”	“Now I see a brighter future.” “Everything is better.”
Sofia		“Far off better now than before.” “I hope my mom can change.” “They are special people. They gave me hope.”
Sarah	“Struggled.” “Nobody wanted me, so I was driven to be self-sustainable and didn’t know how.”	“My circumstances have changed drastically!” “I matured a lot.” “I am better at coping. They taught me to look at the big picture.” “I am happy. Way ahead of where I was and not yet where I want to be.”
Serenity		“At the Table, I realized I am supposed to be the leader.” “My head is above water.” “I am the opposite of two years ago.” “Keep going up the happiness scale of life.” “Life is more of a smoother ride.”
Scarlett	“Couldn’t be independent. Can’t achieve and make it alone. I needed help.”	“I’m no longer in survival mode.” “More stable now.” “I had to depend on someone else’s mercy.” “I have a hope outlook.”
Savannah	“We (married to Grayson) got lost. Living paycheck to paycheck.”	“We are less stressed.” “Crisis is now manageable.”
Sierra	“Life was negative and full of bad people.” “Didn’t think any good people left.”	“I’ve changed. Structured. Committed.” “Best place in my life that I’ve been in my 38 years.” “I am who I am today because of my Table.”

Gavin	“I needed to grow up.” “Life was so big and scary to think about how to go about doing it.” “I had fear and doubt.”	“I handle problems better. I take them one at a time.” “I am not the same person.” “Now I can talk it out.”
Grayson	“Lived paycheck to paycheck.” “No plan in life.” “Never saw success.” “All I ever wanted was a family. My parents didn’t want me.”	“Day and night transformation – greatly!” “Two different worlds.” “Moved from getting help to giving help.” “We are in a good position.” “We couldn’t be more happy.”

Study participants view their life with new hope. They say they are transformed. They attribute their new outlook partly to their new ability to organize a crisis or problem into smaller, achievable steps. Sherry is an immigrant from Africa. She wants to become an OB-GYN doctor and return to her continent to help her people. She is from a large family and did not speak English very well prior to coming to the United States. Her Table mentors worked with her on her goals and charted a pathway to achieve them with her, keeping her accountable. She could see the steps for success and now she is a pre-med student. Samantha’s dream is to work internationally, and she is pursuing a degree that will help her find a job that will send her overseas. Her Table is working with her to organize her journey. She claims she has a lot anxiety. Her Table has helped her achieve these goals with less anxiety than she is accustomed to having when something appears overwhelming. Savannah and Grayson capitalized on their Table mentors’ abilities to run businesses and are pursuing their dream of opening a business together. Gavin achieved his master journeyman as an electrician. Sadie went back to school at 59 years of age to study Computer Information Systems. Giovanni is pursuing additional educational certifications. Gabriel is in school. Sarah is becoming a nurse. All of these study participants stated they had no or very limited goals prior to the Open Table.

Motivation (Table 4.11)

Sierra, “They provide hope. Hope for my kids in turn provides hope for me. I have growth.” When the researcher asked question 17 to describe the biggest challenge they faced

since graduating from the Open Table, many listed several items and included that no longer meeting regularly was a stressor to them. It was difficult for them to stay on task for the goals they set, and they realized they needed the accountability. The group provided motivation and encouraged them weekly. Their meetings served a dual purpose for the study participant. First, the meeting served as a weekly reinforcement for them to focus on their goals; and second, the meeting served as a reunion among friends. The Open Table mentors were encouraging and provided motivation for them to achieve successes.

Table 4.11
Motivation

Study Participant	Before Open Table	After Open Table
George	Suicidal and depressed.	"I'm more involved in my community. I ride the bus and help impoverished people. I call it 'micro-ministry.'" "I'm helping one community agency work with homelessness."
Gabriel	"Stuck in a dark gloomy space." "Felt like Satan had his foot on my neck."	"I can hope now!" "Table members are already in a space I'm trying to get to." "I have a resume." "God put my past under my footstool. I work with youth now!"
Samantha	"I didn't pursue realistic goals."	"I am open to do more things." "Now focused on buying a house."
Gary	"No goals before the Table."	"I'm going for the win!"
Sofia	"No goals before." (Sofia is married to Gary. Interviews were conducted separately.)	"I'm not going to be like my parents in debt. I'm going to change that." "Easier to set goals."
Sarah		"Not depressed in a while." "They have invested so much in me. If I didn't finish school, it is a slap in the face to them."
Serenity	"I had no goals. Just to keep afloat."	After I lost my wallet, I transitioned to the leader." "I'm stabilized from chaos."
Scarlett	"I was just breathing."	"Opportunities are coming." "I see path to normal again."
Savannah	"Confused and overwhelmed. Not driven. No accountability partner."	"We continue to set goals."
Sierra	"No goals. Just get to the end of the week."	"We set goals together (Table)." "Others offer hope." (Got emotional). "The hope they provide, hope for my kids in turn provides hope for me."

Gavin	“No goals.”	“Gave me avenues to serve for ministries.” “Tithe time and money to church.” “Ecstatic about life.”
Grayson		“My wife and I are a powerhouse team.” “We can see the finish line.”

Post-Open Table, the study participants now have to find the motivation and hope from within or from other social capital (SC) networks they establish. Gary and Sofia have great jobs and have increased their savings account equal to six months of their combined salaries. Serenity does not want to go to school. She wants to be an artist and is now motivated to work with a local artist who is famous. Her Table members introduced the famous artist to her, and they became friends expanding her SC. Scarlett found employment after her felonies and now states, “I see a path to normal again.”

Hope Summary

The study participants unanimously shared that they have hope for their future, whether it is regarding school, faith, families, or work. Their Table members fostered relationships through listening (voice), worked together with the participants to obtain the study participant’s goals (collaboration), learned to trust each other through this process (trust), and now engendered in the participants a Hope that was non-existent or was previously superficial. With a positive voice, collaboration, trust, and hope, the study participants mentioned their future goals and the risks they are looking forward to taking. Gabriel said he was one of the first two Tables started in [his city], and now he knows of more that have started. He said, “We’re really going to see a big change occur for the better here in the city, from the inside-out.”

Emergent Theme: Risk Management (R) How does someone with positive SC look at Risk?**Overview**

Except for Griffin who already had a SC structure in place with his family, all study participants believed they were failing, whether in society, at work, as parents, or within themselves. Several study participants said they did not know what normalcy was and that their life was fracturing under the stress. They were unable to calculate the risks for the decisions they made. Stella lived with heroin addicts. Sofia was young and adopted her brother in an attempt to help him out of foster homes. Scarlett committed felonies and lost her nursing license. Gavin drove with drugs in his car on a revoked driver's license. Savannah joined a gang. Prior to the Open Table, the study participants took significant risks and were incapable of mitigating the risks they faced. Study participants said they reacted one of two ways, and they entered a "fight" or "flight" mentality. Scarlett said she had no more goals and avoided pursuing anything. Sierra said she kept hanging with the wrong friends doing drugs and becoming a gang member. Savannah said her inner circle of friends was dangerous.

The final emergent theme is Risk but in the comprehensive context of the other four themes. In other words, risk was evident before and after the Table. Risk-taking prior to the Table universally demonstrated poor judgment in the participants. Gavin said that he avoided problems by using drugs hoping the issues would go away. If they did not, he would "blow up." It was easy to go back to the lifestyle he knew when he had an issue. The problems he faced were, "so big and scared (him) to think about how to go about doing it." He knew he had it in him to do well, but he could not see where he wanted to go. He did not know what it was like to drive down the street without fear because he always had drugs on him and drove on a revoked driver's license. Gavin, like the others, said he took risks that were unhealthy and ill conceived.

They recognized that their Table members also took a risk in helping someone like them overcome their situations and exit out of poverty.

Throughout their year on the Table, the study participants developed mechanisms to alleviate risks. The Open Table used voice, collaboration, trust, and hope to teach the study participant how to take healthy risks and to mitigate them to the lowest level. With a positively developed voice, collaboration, trust, and hope, the study participants felt confident to go past their previous comfort zone and solve problems more effectively. They felt their voice was heard, and they had a good support network of wise counselors (collaboration) whom they trusted with their insecurities. These conditions in turn resulted in a more positive outlook (hope). They had hope that they could achieve their goals and pursue something beyond themselves (Table 4.12).

Sierra said she had to distance herself from chaos and confusion. In so doing, she developed a confidence about her ability to buy a house at a county auction and start a graphic design business. Her Table mentors were an encouragement to her and were a sounding board for this major purchase and business endeavor. Sierra won the auction and was able to purchase it for an incredible price allowing her to have room for herself and her seven children. Her Table members were with her throughout that process, providing encouragement and helping her navigate the bureaucracy of home ownership. They remain close to her now. She said she is able to face challenges.

Table 4.12

Risk

Study Participant	Before Open Table	After Open Table
George	Five degrees and certifications. Couldn't hold a steady job. Felonies.	Has to move. Table is helping him find a neighborhood. He is a registered sex-offender.
Gabriel	"People are like, 'Get up off the ground!' And I thinking in my head, 'I'm probably just going to be sitting around and never get back to work or	"I am going to get out of debt." "Looking for a wife to marry." "I know God has a plan for me!" "He still believes in me." Pursuing education and a job. Wants to

	go back to school.” “I told God I gave up on myself.”	give back to society and help his neighborhood. “Helped me reach certain peaks that I was trying to reach to come out of poverty.” “My dream is to serve on a Table.” “I take advantage of every opportunity the Lord sends.” “Now I am an opportunist.”
Sherry		Can budget. Planned her course through college not to incur debt. Planned academic progression to become OB-GYN and return to her country in Africa and open a clinic.
Samantha	Lost eligibility for college grants.	Works to pay for college. “I have good credit now.” “I know how to research to get out of a problem.” “I am more financially secure.” “Solve problems in little steps.”
Gary	“Didn’t know about credit. No one to guide you.” Accrued \$40,000 in credit card debt.	“We know how to handle things.” (Participated in the Table with his wife Sofia.)
Sofia		“Taught me how to budget and save money for our babies.” “We budget weekly.” “Life becomes easier.” “Working to get enough money for a down payment on a house.” “Helped me adopt my little brother.” “Going to school and two more kids.”
Sarah	Was badly abused while in foster homes.	Going to nursing school. “I want to be a foster parent.”
Serenity	“It’s a hard process applying for aid. I tried. It just wasn’t worth it.”	“I have goals now to have a car and a house.” “Not living paycheck to paycheck.” “Not always thinking about money.” “I have public speaking roles.” “I don’t need college to achieve.”
Savannah		Went to trade school for welding. Moving to another state, open a business with her husband (Grayson), buy a farm, and raise foster children to give them a better life than what they had growing up. “Helped us navigate the court system.” (multiple felonies for her and her husband)
Sierra	“All I wanted was to raise my kids and get out of here.”	Bought a house at an auction. Taking graphic design classes and open a business. “Give back to the community.” “I do public speaking.”
Gavin	“Didn’t know what it was like to drive down the road without fear.” (Had revoked driver’s license and	“My daughter came back to live with me.” “Huge changes, kids back home with me, I’m driving, own my home, and

	multiple warrants for his arrest.) “I was in an out of jail 21 times.” “Used drugs.” “Lost everything.”	remarried.” “Now I’m a master journeymen electrician. I am going to own my own business.” “I want to train prisoners how to be electricians to get their life back. I’m passionate about that.” “If you teach a trade, the less chance they have to reoffend.” “Give back in a big way.”
Grayson	“Tried to use resources. System was overpopulated.” “Challenges used to make us freak out.” “Lived paycheck to paycheck.” “No plan in life.”	“Taking care of wife’s ex-husband (father of her son).” (See Savannah’s aspirations.) “Will foster kids and pass on knowledge.” “My wife and I plan on mishaps (contingencies). Life is full of mishaps.” “We trust God.” “We have a large savings.” “We assess situation and determine what we can do. We organize it into achievable steps.”

After participating with their Tables, none of the study participants said they returned to a fight or flight response. When asked how they solve issues now, everyone said they would reach out to specific people, agencies, organizations, or Table members for help, support, or advice to grapple with the challenges they faced. Drugs, ignoring the problem, alcohol, or “blowing up” were no longer options for them.

Prior to participating in Open Table, study participants described their situations as taking unhealthy risks. As mentioned previously, the study participants felt unstable and unable to achieve anything. Their focus was on survival and their decisions were not well thought out. They saw the system for aid, education, and support as a series of obstacles. They believed the more burdened by their circumstances they became, the more difficult it was to navigate the system. It was cumbersome and sometimes impossible. In other words, they felt the system was rigged against them, which led them to take risks that others would avoid. Stella shared many stories about her inability to get out of the trap. She felt others in her SC network manipulated the system against her. She was required to make appointments with a social worker or her Parole Officer (PO), but she lacked housing, transportation, and funds for public transportation,

or she would be fired from a job if she left for the appointment. The further down the socioeconomic ladder, the more difficult it seemed to them to negotiate the system. Some of the participants thought the richer someone was, the easier they could manipulate the system in their favor. Gavin, George, Stella, Grayson, and Scarlett had felonies and said that their PO would violate them for their parole for the smallest infraction. Gavin said he could not see a path out of his situation. Several shared that it looked impossible to come out of the cycle. Any type of success was short lived if present at all. Success seemed to become hostage to the complexity of the systems.

Because of the Table, Gavin pursued a complex vocation. It required several phases and achievements. He secured his master journeyman electrician certification and now wants to start his own business. At the time of the interview, he had not yet taken his certification exam, but since his interview with the researcher, Gavin contacted me to share that he passed. He wants to tithe 10% of his time to the church and use his talent to “give back in a big way.”

Grayson adopted Savannah’s son from her first marriage. He felt responsibility for his adopted son to develop a good relationship with his biological father. The ex-husband was not doing well and needed a home. He spoke with his Table and discussed all options he thought were available. Grayson knew the best thing for the family was to bring the ex-husband into their home to help foster the son’s relationship with his dad while providing an opportunity for the dad to get back on his feet. He struggled with issues of jealousy, and said he received wise counsel from his Table peers. Grayson felt it was right to help and now the ex-husband lives in their home. Grayson and Savannah established an Open Table for him, teaching him the same strategies to budget and prioritize. He said it is more enjoyable to help people, and he now has the money to help others. He and Savannah are moving to another state to buy a farm and open a

welding business together. They want to bring in foster children to their farm and give them better experiences than they received. He said he and his wife are a “powerhouse team.”

Sarah is studying to be a nurse. Navigating school requirements was foreign to her and her Table helped her budget and work through competing priorities. She also had a terrible foster home experience but now wants to be a foster parent herself to show kids like her that they are loved. She also wants to teach them the skills she learned through her Table and how not to be overwhelmed by their circumstances, but to look at the big picture and make the little steps to get a bigger goal. Her Table gave her the necessary tools for success, and she wants to share these tools. When she graduates from nursing school, she wants to invite those who gave up on her.

Sofia is planning on going to school, but she wants two more children first. Serenity is pursuing her art and has become more social. She is saving to purchase a car and has enough money for a down payment on a house. She is an introvert but now enjoys public speaking. She is not pursuing education because she believes she does not need it for her success. Sierra also does public speaking and wants to give back to her community. In the past, she said she had wanted to run away from it all and move herself and her children far away from [her home city]. She now wants to stay. To enhance her graphic design business, she is taking design classes.

Risk Summary

The examples participants shared illustrate the risks participants were willing to take to positively impact their lives, which previously would have been incomprehensible. Prior to their experience in Open Table, participants were not equipped or lacked the wherewithal to pursue these dreams. Now, they are working, setting aside money for education or a home, or both. Gavin now has custody of his two children. He never thought about pursuing that before. Each of the study participants had developed hope from their relationships with their Table members. In doing so, they could see other opportunities to pursue, and could calculate the cost, time, and

sacrifice required. They had the support and confidence to take risks to improve their lives. They were able to parse out the necessary steps to achieve their goal and therefore mitigate challenges in obtaining them.

Crises

The original research design focused on participants who had a crisis within two years of graduation from their Tables. Everyone listed a crisis, but the main crisis mentioned was the stoppage of their Table. Study participants found themselves in need of a group of people to be able to use their newly developed positive voice, to foster collaboration and accountability, to be transparent and trusting, to share their ideas of hopeful goals, and to help them mitigate risks in the challenges they face. Sofia said that her new community is her work. It became clear that all of the graduates pursued SC with either members of their Table, or they cultivated SC with members of their churches or work. In every case, when asked Questions 17-19, regarding the biggest crisis they faced since graduation, all study participants shared that they relied upon others to find solutions or resources.

Results

As a result of the Open Table experience, the lives of the participants changed. Based upon those lived experiences, this study hypothesizes that the Open Table program is based upon creating an intentional process for developing positive voice, cultivating collaborative relationships, developing trusting relationships, creating hope, and mitigating risks in the lives of their participants. As the study participants positively increased their Voice, Collaboration, Trust, Hope, Risk, they became more confident, secure, positive, and productive.

During the process of the yearlong meetings with their mentors at the Open Table, the study participants' Voice, Collaboration, Trust, Hope, Risk appear to coalesce together into a process that more aligns with those in their community to establish or set goals, find resources,

and develop meaningful solutions to challenges or barriers. Unlike some resources available to those in poverty such as transactional programs that transfer consumable aid, Voice, Collaboration, Trust, Hope, Risk are not zero-sum or finite resources. The researcher found that the wraparound poverty intervention program had an intentionality in helping the study participant develop a voice for positive outcomes. Subsequently, every participant said that because they felt heard, Collaboration became easier and more productive. For example, Sierra shared how it felt not being judged by her Table. All other study participants echoed her comments. With a positive Voice and productive Collaboration to pursue the goals the study participant determined as vital, the study participants began to trust their Table, which would have been difficult to do previously. Study participants communicated that Trust was the most difficult of the themes to establish. Every study participant previously felt they were incapable of allowing someone into their lives that was “healthy” and “supportive.” However, they found the members of their Table to be that and more.

The research questions did not pursue when the study participant began to Trust their Table members; however, two participants voluntarily shared that they trusted their Table members several months into their meetings. During the axial coding process, the researcher could determine that Trust was a necessary condition in order for a participant to develop Hope. As noted previously, participants had difficulty developing trust. However, the results showed that participants who were more transparent with their Table more easily developed Trust. Once Trust was established, the collaboration flourished, which in turn resulted in Hope. Specifically, participants shared that their sense of Hope exceeded anything they had thought possible prior to their experience on the Table.

Voice, Collaboration, and Trust comprise the foundation upon which hope and willingness to take risks take shape. With a strong foundation, the study participants became

hopeful that their circumstance could change, and they became willing to take risks to solve problems that had previously been overwhelming and to take risks that would improve their outcomes. Figure 4.1 presents the interactive relationships between the key five key themes, which collectively led to positive outcomes for the participants.

Prior to their experience in Open Table, participants did not exercise their voice or collaborate with individuals in order to solve their challenges because they did not trust anyone. As a result, they lacked hope and when they took risks, they tended to result in negative consequences. Participants were accustomed to failure, and thought, “That’s the way it is.” The evidence is clear. After participating in Open Table, participants found their voice, developed collaborative and trusting relationships, were hopeful about their future, and were willing to take risks to create positive change in their lives.

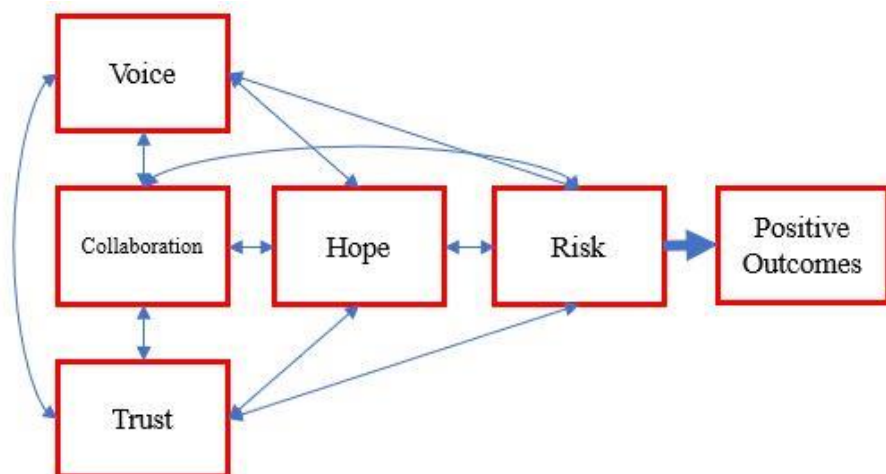


Figure 4.1

The study participants discussed transparency as foundational for them in order to build Trust. Participants shared that they led guarded lives; therefore, becoming open to a group of strangers was a long process. However, once they felt free to share, they said they could also listen better. Participants could see opportunities that were not visible prior. In doing so, they gained Hope to be able to accomplish something that they felt was impossible for them before.

They mentioned an ability to focus on Hope and realized it is critical for growth. Without Hope, they said that they were stifled into a belief that there was no way for them to get out of their circumstances.

The Open Table peer mentors were a group of individuals who understand the complexities of life and have navigated its socioeconomic challenges successfully. When they worked with the study participant facing challenges, they established an intentional and organized approach for assistance. In its essence, each of the Table mentors had a dedicated responsibility and together in many instances, became “family” to the study participants. They worked together establishing budgets, setting goals, and identifying the hurdles the study participants would have to navigate. They enabled the study participants to better navigate the complexities of the system once they hit barriers or challenges to their participant’s goals.

Chapter Summary

“What was ordinary to others was extraordinary to me.” Sierra

The study participants were individuals who considered themselves in poverty or lacked resources for success. They shared that their conditions were hopeless to them, and the system appeared to work against them. They all participated in a wrap-around poverty intervention program that used an intentional method of creating hope in these individuals so that they could change their outcomes. Each participant was asked specifically designed research questions probing how their outlook had changed compared to their experiences prior to the Open Table. Additionally, mission leaders within the organization shared the processes the Open Table uses to assess an individual’s readiness to change.

The results of this study demonstrated the positive impact of Open Table on participants. As a result of Open Table, study participants shared that they had developed their voice, were successful in cultivating collaborative relationships, were able to develop trusting relationships,

which created hope and a willingness to take positive risks in their lives. Together, these conditions had emboldened them to pursue positive outcomes that were previously not possible. Participants gained the ability to access resources they previously thought were impossible to obtain.

The concluding chapter will examine the relevance of each of the critical themes and the emergent theory based on why it is necessary for each to be present and positive to develop an individual's ability for positive outcomes. The emergent theory that explains this impact is the *Intentional Social Capital Construct* theory.

Chapter 5: Conclusion

Discussion

This chapter presents an overall summary of the study made from the research presented in Chapter 4. Additionally, this chapter will provide an opportunity for the emergence of Intentional Social Capital Construct Theory as it pertains to the individual study participants' ability to change their outlook and produce positive outcomes.

Grounded theory methodology allowed the researcher to listen to the participants after they experienced a phenomenological transformation. In listening to their stories of pre and post poverty intervention, the researcher learned from the participants that they found their Table mentors were a community beneficial to their success. In these cases, the participants noted that the level of motivation of their Table encouraged them and enabled them for change. Table mentors created a positive environment to develop in their participants' appropriate Voice, Collaboration, Trust, Hope, and Risk. The five emergent themes within a dynamic Table were interactive with the participant in order for the participant to pursue positive outcomes. However, as discussed previously, several study participants hesitated to participate or be transparent when they started the program. It was not until they had gained the ability to trust their Table members that they could take the next progressive steps and pursue hope and take calculated risk.

Summary of the Study

Poverty is a global phenomenon with a devastating financial impact on the populations it affects (Saunders & Wong, 2012). The cost to eradicate poverty continues to rise as the poverty rate hovers around 15% in the U.S. (Chaudry, et al., 2016). The conversation about methods to reduce poverty is not only critical to those experiencing generational poverty, but also to governments attempting to address poverty. A systematic process using social capital that is effective and transcends politics could change the outcomes of those experiencing poverty. This

study found evidence that the program, The Open Table, using wraparound social capital poverty intervention with their participants, led to positive outcomes for participants.

Major Findings

Previous research focused on income-based poverty intervention policies, leaving a gap in the research regarding intervention programs using social capital. Putnam hinted on the effects of social capital and poverty when he discussed the influence of social capital for safe and productive neighborhoods (2000). He stated that poverty is as important a factor in determining the safety and productivity of a neighborhood as social capital, urbanism, and racial composition (Putnam, 2000). In doing so, he distinguished poverty as a separate characteristic from social capital. However, this research indicates that social capital can be used as an influencer for escaping poverty. Putnam further claimed that neighborhoods who live in extreme poverty are truly disadvantaged, and they could benefit most from appropriate social networks (2000). Putnam shared a correlation where neighborhoods who presented higher levels of social capital enjoyed lower crime rates (2000). In the next chapter, Putnam discusses how positive social capital at the individual level has a positive affect on their economic outcomes (2000). He further posits that the economically and educationally disadvantaged lack the necessary social capital to provide a hand-up (Putnam, 2000), but he stops short of communicating how social capital can help an individual exit poverty. Additionally, there is a substantial gap in research applying social capital principles in programs to help an individual exit poverty.

This research on addressing generational poverty using social capital lends itself to the emergence of an *Intentional Social Capital Construct* (ISCC) Theory. ISCC theory is the process of cultivating the five emergent themes discussed earlier with a positive partnership with the participant in order to produce positive and comprehensive interactions for improved outcomes. Using ISCC theory enhances the participant's ability for appropriate development of voice,

cultivating collaboration, developing relationships of transparent trust, creating opportunities where the participant fosters more hope, and taking practical risks. Altogether, Positive Voice, Collaboration, Trust, Hope, Risk allows for success within the experiential phenomena of an individual in poverty attempting to improve their life and move out of poverty. Additionally, ISCC builds constructive social capital in individuals who did not previously have networks to help them out of poverty. Below is an hypothesis that emerged from the study which future research can examine.

Hypothesis: Individuals participating in programs building upon ISCC theory develop positive social capital.

The Open Table equipped and empowered individuals in partnership with their Table mentors to chart a visual path for success which had previously been unattainable or unimaginable. The five themes or conditions for success that emerged from this research ultimately increased the participants' social capital during and after the program. Figure 5.1 visually presents how the five themes or conditions build upon and enable each other.

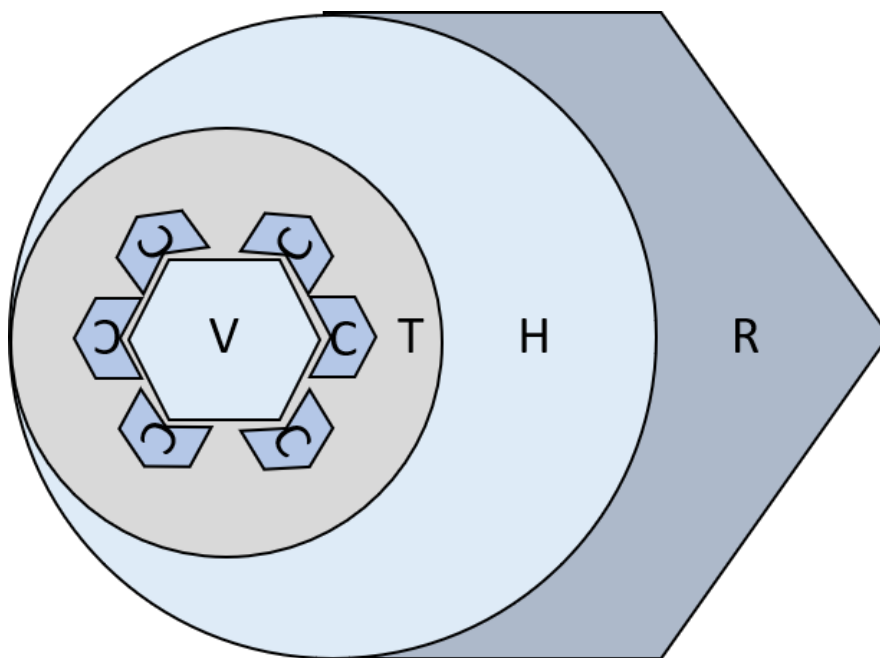


Figure 5.1 ISCC Theory

Through the Open Table, a group of mentors help a participant design and execute a comprehensive and collective strategy for the individual's success. As the research showed, a critical assessment of readiness is required before implementing a program based upon ISCC theory. In the case of Graham, he entered the program based upon a family recommendation to the group. His participation was considered successful by his Table; however, he admitted to the researcher that he is diagnosed with significant mental health issues and severe depression. He did not believe he gleaned anything from his Table, but he communicated that he knew much more than they did about any of his issues. If he had been able to take the readiness to change assessment, his Table may not have been formed. The Open Table's policy is to conduct an assessment, which may prove essential for success.

ISCC theory develops within the participant a voice that empowers them to share their needs and their challenges. In so doing, they also have the ability to share their goals. With the help of the Table members, the participants were able to develop a positive voice they could use on their own behalf. No longer did they feel isolated or that their voice just produced noise; instead, their voice had meaning and could affect change. According to Blair, poverty gaps decrease when the poor believe they can speak on their behalf to achieve social justice (1969). Blair talks about community. She asserts that building a society requires those with wealth to look at all the needs of the poor, allow them to participate, and be willing to listen to them (Blair, 1969).

Collaboration that is constructive continues to build upon Voice in the ISCC theory. In her research, Blair suggests that communities of rich and poor are both responsible to work in harmony to provide everyone a genuine opportunity for success (1969). Using ISCC theory, the Open Table builds Collaboration among Table members to create communal goals for the individual to seek resources from their Table mentors and outside of their Table. Participants

believed their experiences prior to their Table were isolated or part of a dysfunctional system as they felt incapable of accessing transactional resources for long-term improvement. Blair argued that poverty programs fail to “take root” because the poor feel alienated (1969). The ISCC theory builds a group dynamic using diverse capabilities as a framework for not only bridging but also bonding social capital. The participants’ Tables were positioned to help their participants seek out and obtain services that focused beyond immediate needs and instead to find resources to increase their long-term capabilities. Blair posited in her seminal article that domestic poverty programs were experimental, and success was unreliable, inconsistent, or nonreplicable (Blair, 1969). It is here the study of ISCC theory found Putnam’s research of improving an individual’s social capital to be consistent with improving their socioeconomic outcomes. Putnam states that the group must share in the principle of generalized reciprocity (Putnam, 2000). Coming together weekly for one year is an incredible investment of time and resources by each of the members of the Table. For the participant, they must commit to change and meet regularly with a group of strangers. These strangers also commit for a year and shoulder the responsibility of providing resources the participant lacks to achieve their goals. The Table members know that the participant lacks funds and transportation, and may have significant challenges for housing, education, or legal issues. Collaboration done properly builds mutual trust within the newly formed community. A community that relies on generalized reciprocity, according to Putnam, is more efficient than a distrustful society (Putnam, 2000). The most significant motivator for those in poverty is in creating relationships with others who can help them make a significant difference (Payne, 2019). Payne posits that individuals in poverty need role models with whom they can associate to help them develop emotionally and become more functional in a dysfunctional system (2019). She further states, “To become a functioning adult, one moves developmentally from being dependent to being independent to being interdependent (Payne,

2019). In essence, it is the process for an individual to transition from complete dependency to an ability to work together with other adults (Payne, 2019). ISCC theory is transformational for the individual to learn the process of working together with other adults to develop interdependent relationships. The process is also recognized as transference of bridging to bonding social capital described by Putnam (2000). A consistent challenge the participants mentioned after their Table ended was their loss of interdependence with their Table members. The participants realized the importance and looked into their social capital circles to identify other adults with whom they could continue to build these relationships once they ended their Table.

Building Trust in ISCC theory takes time and transparency of all members involved. The participants of the Table discussed their individual process of overcoming their doubts and learning to trust their Table mentors. Participants could not break the cycle of poverty without the help of their Table. They said that their decision-making improved corresponding with the trust of their Table. Research shows that individuals who are lower on the socioeconomic scale are more likely to make short-sighted choices at the expense of long-term gains (Jachimowicz, Chafik, Munrat, Prabhu, & Weber, 2017). Participants felt the Table members were able to remain nonjudgmental and could build trust with them. This finding and theoretical construct is particularly important because Gereke, Schaub, and Baldassarri (2018) found that individuals living in poverty exhibited lower levels of trust. Research shows that individuals continue to build social cohesion reinforcing the participant's voice and ability to collaborate (McLeigh, McDonell, & Lavenda, 2018). Additionally, individuals who suffer in poverty who gain the trust and can collaborate with their community are more able to make decisions based upon a reliable outlook of their future (Jachimowicz, Chafik, Munrat, Prabhu, & Weber, 2017). The participants commented that the members of the Table were transparent with them. During the Breaking of Bread on the first day, the Table mentors shared their stories. The participants said that they

realized their mentors had challenges like they did and that they learned to share reciprocity in being transparent with each other. They stated that the more they could share with their Table mentors, the more they could build and maintain better trust and credibility with them.

The first three themes of Voice, Collaboration, and Trust are a foundational component for ISCC theory to develop Hope. Cultivating hope manifested itself in participants being able to solve problems that they had previously avoided. The participants were able to develop their ability to voice their concerns with their Table members, cultivate collaboration, and become trusting. In doing so, they laid the foundation for their outlook to see solutions. According to Hong, Hodge and Choi (2015), hope is generated by having a positive mental state that is derived from success in meeting goals, and that hope drives motivation in individuals to take actions to achieve economic goals. They further posit that a lack of hope results in individuals becoming overwhelmed by their challenges (Hong, P., Hodge, & Choi, 2015). The participants repeated these concerns. They shared that prior to their Table, they avoided problems, sought ways to escape or flee, or simply ignored them. After their Table experience, they said they can look at the problem they face with confidence, break it down into solvable sections, and set goals they know they can achieve.

The ISCC theory continues to progress from a hopeful outlook for the participant to identify and mitigate risks to achieve their goals. They said they are hopeful and have the organizational skills to identify and find solutions. As previously stated above, hope is a motivator for individuals to pursue economic goals and success. Individuals with hope can see a viable path to success and believe they have the interdependence of an agency to progress along a riskier path (Hong, P., Hodge, & Choi, 2015). Snyder suggests that an individual with high-hope pursues goals with “pathway thinking” and has the ability to produce plausible alternative routes if necessary (Snyder, 2002). Lybbert and Wydick suggest a shift of economist research

from the relief of external constraints on the impoverished to the role of an individual's internal constraints affected by hope and aspirations (2018). They further posit that an individual's development of a "capacity to aspire" is a "navigational capacity" for an individual to explore possibilities to improve their outcomes (Lybbert & Wydick, 2018). Social networking and acclimation to a group of healthy influencers was the causal mechanism for the participants in the study to pursue risks as they understood better their own capacity and resources. Participants in the research developed a high level of trust with their Table and were able to make more significant choices to impact their well-being. According to research, individuals who believe their community can shield against adversity, or buffer them if they run into financial struggles, will pursue riskier outcomes (Jachimowicz, Chafik, Munrat, Prabhu, & Weber, 2017). In this study, as a result of their experience in Open Table, participants demonstrated a new outlook of their circumstances. They were enthusiastic about their ability to move out of poverty, and they took risks they would not have done previously to improve their outcomes.

There is a paucity of research studying programs focused on individuals experiencing poverty using social capital networks, relational assets, or resources designed to develop their voice, cultivate collaboration, foster trust, build hope, and take calculated risks to improve their outcomes. Conversations about poverty usually focus on income thresholds that were initially developed in the early 1950s and used by President Johnson as he declared War on Poverty in 1964. Income thresholds are necessary for quantitatively assessing an individual's ability to obtain resources. Income, however, is relational to the individual's needs and geography. Income may display one factor of poverty, but as this study shows, there are other areas where a community can focus to help an individual address the impact poverty has on them personally. Research on developing social capital for individuals impacted by poverty is lacking. The ISCC theory provides conditions that have proven impactful to an individual, which could, in turn, be

adapted for other programs focused on improving the lives of individuals. Specifically, other antipoverty intervention programs could develop similar intervention programs using a group of mentors to build social capital for individuals impacted by poverty. A key element of the intervention is the inclusion of a readiness to change measurement to determine if individuals demonstrate the capacity and motivation to change their situation.

Implications for Action

ISCC theory has potential applications and is easily replicable. It involves an entire team whose members believe in the person participating in the program such as the Open Table. ISCC is transferable to other areas such as education and vocational development. Community involvement in preparation and development could happen in middle school to build student confidence in academics, in college to advise entering freshman, or in difficult adolescent periods to build emotional maturity.

Potentially if implemented community wide, ISCC may prove to be an important theory in addressing community and generational poverty. The benefits of ISCC for individuals if applied at a community level could be transformative.

ISCC outlines key conditions – Voice, Collaboration, Trust, Hope, and Risk – that impacted the ability of individuals to navigate the challenges of a complex system. A deeper dive into each of the emergent themes would benefit individuals impacted by poverty and communities grappling with how to better address generational poverty. Moreover, it offers an approach whereby members of a community could participate and contribute to building the social capital of others living in their community. Further, this theory offers promise in other situations, including other countries. The impact of poverty on individuals is a global issue. The World Bank and the International Monetary Fund (IMF) require member countries to evaluate their abilities to reduce poverty and publish Poverty Reduction Strategy Papers. Countries

considered are within the Heavily Indebted Poor Countries initiative (HIPC). On the IMF website, it states:

“... PRSPs describe the country's macroeconomic, structural and social policies and programs over a three year or longer horizon to promote broad-based growth and reduce poverty, as well as associated financing needs and major sources of financing. Interim PRSPs summarize the current knowledge and analysis of a country's poverty situation, describe the existing poverty reduction strategy, and lay out the process for producing a fully developed PRSP in a participatory fashion,” (IMF, 2020).

The World Bank and IMF working with the United Nations (UN) could encourage programs based on ISCC, which if widely implemented, may result in addressing poverty at a community level.

Recommendations for Future Research

There are several particularly promising areas for future research. Scholars should implement a quantitative study testing the ISCC theory developed for Open Table. Future studies should track participants in Open Table over time to assess the extent to which they continue to leverage their social capital. Additionally, future research should focus on developing and evaluating programs that are created based on ISCC within the framework of Voice, Collaboration, Trust, Hope, and Risk, targeting individuals impacted by poverty. Further studies of programs applying ISCC theory should examine the extent to which “readiness” predicts success. Future research could explore the application of ISCC theory in other areas, such as education or foster care. Six of the participants in this research had aged out of foster care. ISCC theory could provide future participants resources for them the year before they transition out.

Limitations

Given the research design, the original sample size for this study was small with 18 participants and was not designed to be generalizable. As explained in Chapter 4, one of the participants was excluded from the analysis because he entered the program contrary to the program's guidelines, reducing the sample to 17 participants. Programs that use ISCC would need to consider entry assessments to determine the prospective participants' capabilities, motivation, and readiness to change. This process would limit participation and identify those who may not be motivated or ready to change.

The research maintained confidentiality of those involved, and the participants knew the researcher was studying the efficacy of their program. Possible participants were contacted and invited to join the study, but only the names of those who responded comprised the group from whom participants were randomly selected. The researcher recognizes that the sample may be biased if those who had a favorable experience in Open Table were more likely to respond to the invitation.

Related Research

ISCC theory builds upon existing research on social capital. There are three theories that correlate in some manner to the ISCC theory: wraparound theory, stages of change, and intentional change process. Van Den Berg and Grealish studied the wraparound theory regarding adolescents with emotional and behavioral disorders. They identified critical components for success that also relate with the ISCC theory. In their work, they identify the importance of developing a community team, the value of ensuring child and parents accessibility to options, the necessity that the participants' voices are listened to throughout the entire process, and the benefit to the participants as they feel a sense of ownership in their outcomes (VanDenBerg & Grealish, 1996). Additionally, they suggest the stakeholders meet regularly to ensure the family

does not feel alienated and are part of their development process (VanDenBerg & Grealish, 1996). Prochaska and Norcross present the stages of change used by the Open Table. In their work, they discuss the four stages: precontemplation, contemplation, preparation, and action; and the transtheoretical model differentials within each stage (Prochaska & Norcross, 2001). This research clearly focuses on the ability to assess the participant's capability for change, but it also includes the necessity to engage the participant in their own action (Prochaska & Norcross, 2001). Lastly, this model helps the participant set realistic goals that unpack difficult scenarios and reveal simpler solutions (Prochaska & Norcross, 2001). The intentional change process builds upon trusting, supportive relationships to facilitate individual change (Smith, 2006). In his work, Smith highlights Boyatzis' model of intentional change as it is applied to the development of social capital (2006). Smith posits that change requires five discoveries to develop an individual's social capital: first, the participant envisions their ideal self; second, the participant understands their real self; third, the participant develops a learning agenda; fourth, the participant experiments with and practices new behaviors; and fifth, the participant draws upon their core network of existing relationships (2006). Smith discusses the importance of the first and second discoveries overlapping with each other for the participant to move on to the third (Smith, 2006).

Conclusion

Generational poverty has a profound effect on many levels of society. It hurts those who remain in the cycle of poverty, it is costly to the taxpayers who are paying for programs that appear to have little or no effect, and it divides policy makers in their ideas to pursue solutions. From a granular grass-roots level to a global level, ISCC theory can influence local civic and political leaders, as well as larger state and national leaders to develop a comprehensive intervention to reduce poverty significantly. At the local level, churches, agencies, rural, and city

leaders can infuse ISCC theory into their policies creating systematic programs for substantial poverty reduction. On each level, governments, civil-service organizations, faith groups, and a large percentage of middle-class and upper-class citizens higher on the socioeconomic scale are already engaged in addressing poverty in their communities. In turn, to end generational poverty, governments and agencies can shift a portion of their resources from income intervention transactional programs to transformational programs, making policies that use ISCC theory to affect the impoverished population. The Open Table is a proven model that uses ISCC theory to focus on the individual and develop their resources and capabilities to overcome their circumstances and achieve success as they defined it themselves. The Open Table model expressed the ability to identify Table members equipped to seek and provide the transactional opportunities as well as develop in the participant a sense of ownership of their own positive outcomes.

The results of this study are impactful. All the study participants achieved or are on their way to achieving success and ending their generational poverty cycle according to their personal assessment. Participants involved in Open Table used ISCC theory in their development. They shared stories of their lives prior to and after their participation with their Table. They wanted an opportunity to have a productive Voice, to cultivate Collaboration, to build and maintain Trust, to foster and grow Hope, and to take the necessary Risk for success. After participating in a program using ISCC theory, their perceptions and experiences changed; they were clearly focused on successes. Participants' self-confidence, ability to maintain employment, lack of anxiety when facing overwhelming tasks, and reliance on social capital changed their perspective into one that was hopeful. Compared to their behaviors prior to Open Table, participants were more productive members of their community and more optimistic about their future after their Table experience.

The emerging ISCC theory is an effective tool used to empower individuals with an outlook for success to overcome their situation. The research revealed that impoverished individuals are not to be dismissed, and that they have the capacity and motivation for success. The ISCC theory is a wraparound poverty intervention model that leverages social capital to reduce poverty. It is the framework that encourages interdependence. This research indicates the necessary components of Voice, Collaboration, Trust, Hope, and Risk as they apply to a group of mentors and an individual desiring to exit poverty. The research implies that there is an expectation of the Table members to assume responsibility. They must provide the necessary skills to foster Voice, Collaboration, Trust, Hope, and Risk, and to incorporate *bridging* social capital to obtain resources, and *bonding* social capital to develop lasting camaraderie.

As our localities struggle to continue the war on poverty, the current transactional intervention programs are not sustainable. ISCC theory addresses the needs of individuals while giving the localities the tools necessary to cultivate their growth. Existing social capital theory does not comprehensively address the current poverty crisis. ISCC theory is a bridge to future poverty intervention solutions.

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Appendix A: Theory of Hope Trait Hope Scale

The Theory of Hope Trait Hope Scale (Snyder, 2002) twelve questions are as follows:

Directions: Read each item carefully. Using the scale shown below, please select the number that best describes YOU and put that number in the blank provided.

- | | |
|-----------------------|----------------------|
| 1. = Definitely False | 5. = Slightly True |
| 2. = Mostly False | 6. = Somewhat True |
| 3. = Somewhat False | 7. = Mostly True |
| 4. = Slightly False | 8. = Definitely True |

- ___ 1. I can think of many ways to get out of a jam.
- ___ 2. I energetically pursue my goals.
- ___ 3. I feel tired most of the time.
- ___ 4. There are lots of ways around any problem.
- ___ 5. I am easily downed in an argument.
- ___ 6. I can think of many ways to get the things in life that are important to me.
- ___ 7. I worry about my health.
- ___ 8. Even when others get discouraged, I know I can find a way to solve the problem.
- ___ 9. My past experiences have prepared me well for my future.
- ___ 10. I've been pretty successful in life.
- ___ 11. I usually find myself worrying about something.
- ___ 12. I meet the goals that I set for myself.

Note. When administering the scale, it is called The Future Scale. The agency subscale score is derived by summing items 2, 9, 10, and 12; the pathway subscale score is derived by adding items 1, 4, 6, and 8. The total Hope Scale score is derived by summing the four agency and the four pathway items. From "The Will and the Ways: Development and Validation of an Individual Differences Measure of Hope," by Snyder, Harris, et al., 1991, *Journal of Personality and Social Psychology*, 60. P. 585. Copyright 1991 by the American Psychological Association and the senior author.

Appendix B: Interview Questions

Interview Questions: During this discussion, please think about yourself right now when you answer these questions. Take your time and focus on yourself and what is going on in your life right at this moment. Once you are ready, we can begin.

1. Demographic Information: Name, age, gender, nationality, city and state.
2. Describe your circumstances prior to participating in the Open Table.
3. Describe the Open Table and your experiences.
4. How have your circumstances changed?
5. If you should find yourself in a jam now, what are some ways you can think of to get out of it?
6. What were some of the ways you would think of to get out of a jam prior to participating in the Open Table?
7. What were your goals before participating in the Open Table?
8. What resources were available to you to achieve them?
9. At this present time, what goals, if any, are you pursuing?
10. What are the ways you would use now to achieve your current goals?
11. What are the possible solutions you use to solve any problems right now?
12. How successful do you consider yourself?
13. What are the goals you have achieved since graduating the Open Table?
14. Compare yourself prior to participating in the Open Table. What are the differences, if any, you used to solve a crisis?
15. Do you rely on others to achieve your goals?
16. If so, how? If not, why not?
17. Please describe the biggest challenge you faced since graduating from the Open Table.
18. How did you handle this challenge?
19. Was your approach different from the way you would have handled it prior to the Open Table?
20. What advice would you give to someone who is facing a difficult challenge? Or, What would you tell a younger you facing a difficult challenge?
21. Do you still maintain relationships with your table peers?

Modified order after first survey:

1. Demographic Information: Name, age, gender, nationality, city and state.
2. Describe your circumstances prior to participating in the Open Table.
3. What were your goals before participating in the Open Table?
4. What resources were available to you to achieve them?
5. What were some of the ways you would think of to get out of a jam prior to participating in the Open Table?
6. Describe the Open Table and your experiences.
7. At this present time, what goals, if any, are you pursuing?
8. What are the ways you would use now to achieve your current goals?

9. If you should find yourself in a jam now, what are some ways you can think of to get out of it?
10. What are the possible solutions you use to solve any problems right now?
11. How have your circumstances changed?
12. What are the goals you have achieved since graduating the Open Table?
13. Do you rely on others to achieve your goals?
14. If so, how? If not, why not?
15. How successful do you consider yourself?
16. Compare yourself prior to participating in the Open Table. What are the differences, if any, you used to solve a crisis?
17. Please describe the biggest challenge you faced since graduating from the Open Table.
18. How did you handle this challenge?
19. Was your approach different from the way you would have handled it prior to the Open Table?
20. What advice would you give to someone who is facing a difficult challenge? Or, What would you tell a younger you facing a difficult challenge?
21. Do you still maintain relationships with your table peers?

Appendix C: The Open Table Stages of Change Assessment Readiness Survey

Each statement below describes how a person might feel when approaching problems in his/her life. Please indicate the extent to which you tend to agree or disagree with each statement. In each case, make your choice in terms of how you feel right now, not what you have felt in the past or would like to feel. For all the statements that refer to your “problem”, answer in terms of problems that keep you from moving ahead in life.

There are five possible responses to each of the items in the questionnaire:
1=Strongly Disagree 2=Disagree 3=Undecided 4=Agree 5=Strongly Agree

Select the number that best describes how much you agree or disagree with each statement.

Open Table Readiness Survey

1. I do not do anything that cause my problems.
2. There are things I could do to make my life better.
3. I have a clear plan in place to make my life better.
4. I work to better myself every day.
5. There is nothing I can do to better my life.
6. I want help figuring out what to do with my life.
7. I plan to change so I can reach my goals and be happy.
8. When I am not happy with my life, I do what it takes to make it better.
9. There are things I do that make it harder to live my life, but I do not think I can change.
10. There are things I would change to make my life better.
11. I am becoming serious about what I want and how to get there.
12. I am working hard at leading a happier life.
13. I do not see how learning about myself will help me improve my life.
14. I wish I knew what to do to make my life better.
15. I am working on finding out what I want in life.
16. It is hard sometimes, but I am working to improve myself.
17. Since we all have problems, I think we should just keep them to ourselves.
18. It might be worthwhile to work on myself.
19. I am taking step toward a better life for myself.
20. I know what I want to do with my life, and I am working hard to get there.
21. I cannot change my problems, so I deal with them.
22. Learning more about myself might help me reach my goals.
23. People are helping me make important changes in my life.
24. I am doing specific things to make my life better.

University of Rhode Island Change Assessment Scale (URICA) (University of Rhode Island, 2019).

Appendix D: Informed Consent Agreement

Please read this consent agreement or listen carefully as it is read to you before you decide to participate in the research study. You are being given a copy of what you read or what is read to you – keep your copy.

Project Title: Wraparound Poverty Intervention Models: Transfer of Social capital Reduces Poverty

Purpose: The purpose of this research study is to identify the Open Table successes in an antipoverty program that involved social capital or relational assets. It also seeks to determine what experiences were important for you to rely upon when a crisis occurred within two years of graduating the Open Table program. This study hopes to create a theory that may be studied further by identifying common factors found in antipoverty program success stories using social capital.

Participation: You are being asked to participate in this study because you:

1. Graduated the Open Table poverty intervention program
2. Experienced a crisis within two years of graduation

This study will take place in an agreed upon location. You will be asked to share your story about your path to success.

Time Required: Your participation is expected to take no more than one interview spanning no more than two hours.

Risks & Benefits: The potential benefits and risks associated with this study are the opportunity to share an unheard story about individual success out of generational poverty. This collaboration could help begin a trend of discovering methods to stop generational poverty. The interview will be conducted casually, and participants will not be forced to discuss areas of their story that they wish to keep private. If participants experience anxiety due to the nature of sharing their story, participants should share that with the researcher, and the interview can be terminated. Confidentiality will be maintained throughout the study so that participants feel free to share their personal experience, which could help others.

Compensation: There is no compensation for participating in this study

Voluntary Participation: Please understand that participation is completely voluntary. You have the right to refuse to participate and/or answer any question(s) for any reason, without penalty. You also have the right to withdraw from the research study at any time without penalty. If you want to withdraw from the study, please tell the co-PI during your participation. The

researcher reserves the right to end your participation for falsifying information. You will not be penalized if you do not participate.

Confidentiality: members of the research team will maintain your individual privacy throughout this study. In order to preserve the confidentiality of your responses, we will keep participant information such as your interview information locked in a file cabinet in my home office.

Whom to Contact with Questions: If you have any questions or would like additional information about this research, please contact James Cook at cook_r@lynchburg.edu. You can also contact my faculty research sponsor, who is the Principal Investigator (PI) for this project and is supervising my work on the study, Dr. Sally Selden at sselden@citadel.edu. The University of Lynchburg Institutional Review Board (IRB) for Human Subjects Research has approved this project. This IRB currently does not stamp approval on the informed consent/assent documents; however, an approval number is assigned to approved studies – the approval number for this study is LHS1920010. You may contact the IRB Director, Dr. Alisha Walker Marciano, through the Office of the Vice President and Dean for Academic Affairs at Lynchburg College at 434.544.8266 or irb-hs@lynchburg.edu with any questions or concerns related to this research study.

Agreement: I understand the above information and have had all of my questions about participation in this research study answered. By signing below, I voluntarily agree to participate in the research study described above and verify that I am 18 years of age or older.

Signature of Participant _____ Date _____

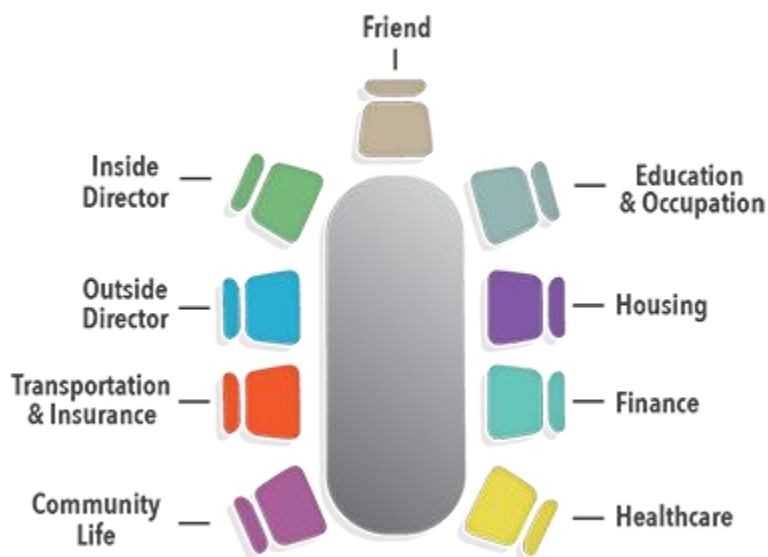
Printed Name of Participant _____

Signature of Researcher _____ Date _____

Printed Name of Researcher _____

Appendix E: The Open Table Model

The Open Table Model – Diversity/Responsibility of the Table Members



Communities can successfully address daunting social challenges. Many communities and states have effective systems to access formal services, but often do not have a process of accessing the other and equally important aspects of social determinants of health (SDOH). People with complex needs – including poverty, isolation, mental health, and chronic illness – need social connectedness and access to a broader array of social capital supports to move to healthier and better lives.

The Open Table model demonstrates how a trained, structured, collaborative approach can energize the relational and social capital in communities to provide a continuum of support and transform lives. Through an understanding of the inexhaustible resources of relational and social capital, the community can move from a scarcity perspective to one of abundance.

<https://www.theopentable.org/models/>

Excerpt from the Open Table Referral Process Handbook Final JF 4-3-19

Starting the Open Table Process

There are three initial meetings once a candidate becomes a participant (B/S/F) on a Table.

1. **Table Launch Meal:** The B/S/F meets with the Table members to share a meal and get to know one other. After the meal, the Table members share their life stories and the reason they have chosen to participate in the Table (the B/S/F does not share at this meeting).

2. Life Story: This is the time when the B/S/F shares their life experience with the Table members. The B/S/F will not have to discuss or answer any questions about which they are not comfortable.
3. Life Plan: This is the time when the B/S/F shares their vision for what life could be like in a year, and together with the Table members, brainstorms different ideas to help make that happen. The Life Plan is just a starting point and is not set in stone.

The remainder of the meetings with the B/S/F and the Table members will take place approximately once a week for one hour and will focus on the goals and progress on the Life Plan. In addition to these regular Table meetings, the B/S/F may meet with individual Table members about specific topics or goals. Tables are also encouraged to meet socially with the B/S/F and will plan around the schedule of the B/S/F.

*B/S/F = Brother/Sister/Friend